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THE
HOMŒOPATHIC VADE MECUM
OF MODERN
MEDICINE AND SURGERY.

FROM REVIEWS OF THE "VADE MECUM."

"Homœopathy is now acknowledged in quarters where it was once ignored, and many who, like the author of this compendium, graduated under allopathic auspices, have since recognised the superiority of this philosophic school of medicine. We must confess to having studied this 'Vade Mecum' with deep interest. It is written in a scholarly and lucid style, and great pains have evidently been bestowed upon its preparation. From preface to index it wears the aspect of a text-book suited alike to the professional student, the clergyman of a parish, and the head of a family. Encouraged by the success which has attended previous efforts in the same field, Dr. Ruddock now essays the bolder enterprize of endeavouring to furnish a consecutive, and, we may add, complete view of modern medicine and surgery. The several functions of the body are familiarly explained, and 'the ills that flesh is heir to' are carefully enumerated. Diagnosis is, however, wisely supplemented by medical instruction how to proceed in the absence of a duly qualified practitioner, or in cases of emergency. Indeed, one could scarcely desire a more convenient book of reference for the library table or travelling chest. For missionaries we should think it will be found especially useful, since they are oftentimes left entirely without the resources so available in our dear native land. The work is printed in clear type, on good paper, and affords unusual facilities for reference."—*Church Standard*.

"It is exceedingly comprehensive. The descriptions of diseases seem to be drawn with much care, and are the result of a large amount of experience and observation; such careful descriptions of the manifestations of various diseases will enable the reader, professional or otherwise, to identify with certainty those which come under his own observation. We commend the book as a most valuable and useful one."—*The Halifax Courier*.

"The student and the visitor of the sick will find in the work before us a vast fund of useful information—information conveyed in a clear and practical style, by one entitled to speak with authority on the subject. We commend the work to all homœopaths, and to others interested in the subjects of which it treats."—*Morning Advertiser*.

"That there are among the popular guides to homœopathic practice some which are as perfect as, under the condition of non-technicality, they can be, is acknowledged; and it is no slight recommendation to Dr. Ruddock's *Vade Mecum*, to say that, in its order, arrangement, and details, it is equal to the best."—*The Homœopathic Review*, July, 1864.

"The present volume is, throughout, a thoroughly practical work. 'The chapters on the nature and treatment of diseases are the result of many years' close observation and practical application in the two largest hospitals of London—St. Bartholomew's and Guy's—in dispensary practice with other homœopathic medical men; in the consulting room, and at the bedside.' The gentleman who can use such language as this with truth, is not to be shoved aside as an empiric. The work is very comprehensive; in all respects answering to its title. It is calculated to do much good."—*British Standard*.

"The volume is carefully compiled, and evidences the experience which the author has had in the London hospitals."—*The Reader*.

THE
HOMŒOPATHIC VADE MECUM
OF MODERN
MEDICINE AND SURGERY.

FOR THE USE OF
JUNIOR PRACTITIONERS, STUDENTS, CLERGYMEN,
MISSIONARIES, HEADS OF FAMILIES, ETC.

BY
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Manual of Homœopathic Treatment," etc. Editor
"The Homœopathic World."



SECOND EDITION, MUCH IMPROVED AND ENLARGED.

LONDON:
JARROLD AND SONS, 12, PATERNOSTER ROW.
And all Homœopathic Chemists and Booksellers.

1867.

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PREFACE.

The publication of five editions of "The Stepping-Stone to Homœopathy and Health," comprising forty thousand copies, has materially facilitated the preparation of "The Vade Mecum;"* while an extensive correspondence with many of the readers of the former work has led to a more intimate acquaintance with the requirements of persons consulting a domestic book.

The work, however, is designed, not for domestic use alone, but for junior practitioners also. The author may therefore be permitted to remark, that the chapters on the nature and treatment of disease are the result of many years' close observation and practical application in the two largest hospitals of London (*St. Bartholomen's and Guy's*), in dispensary practice, in the consulting-room, at the bedside, and in conference with other homœopathic physicians. He therefore presents the work to such, and to all who desire to find the most certain and speedy means of relieving suffering, and of prolonging life, with confidence; and predicts the happiest results whenever the directions of the Manual are faithfully carried out.

Objections have been made to domestic medical works, both on the ground of their danger, and as likely to inter-

* From *Vade*, go, and *mecum*, with me, a Latin phrase applied to a book which a person carries with him for its constant usefulness.

fere with the legitimate pursuits of the profession. Neither objection is of any force. It is well known that in nearly every family domestic drugs *are* employed—*castor oil*, *Epsom salts*, *rhubarb*, *sulphur*, *magnesia*, *antibilious pills*, and even preparations of *mercury* and *opium*. We are not responsible, therefore, as *originators* of domestic treatment; but finding drugs everywhere in use, we have sought to *reform* the practice by substituting remedies and suggesting measures, whose virtue is that they are not only more *harmless*, but very much more efficacious than those too frequently adopted. Departures from health, at first simple and uncomplicated, frequently occur, the nature of which then is so plain, and the treatment so obvious, that with the guidance of a work like the present, a safe course may be taken. Hence it is that we have made most prominent diseases of common occurrence—cold, fever, dyspepsia, etc., at the early stages of which appropriately selected remedies may be administered with good hope of success, but which, neglected, might lay the foundation of most intractable and fatal maladies.

At the same time, it is proper to add, that in all serious cases, or when the treatment suggested is insufficient quickly to bring about the necessary improvement, professional advice, if possible, should be procured. The vast resources which a professional homœopath has at command, of which the present volume represents but an inconsiderable fraction, should encourage hope in most difficult and complex cases.

The learning of the medical schools is as essential for the *general homœopathic* practitioner as for the allopathic, and

cases are of frequent occurrence in which it is impossible to act judiciously without an acquaintance with anatomy, physiology, pathology, surgery, etc. A most obvious advantage, rendering professional treatment when accessible, always preferable, is the one just referred to, namely, the amplitude of the resources at the command of a medical man, including hundreds of remedies, in various forms and attenuations. Successful treatment depends not alone on the choice of the right remedy, but also on its adaptation in form and strength to the age, sex, habits, temperament, or idiosyncrasies of the patient. In this respect, the writer is neither an exclusively high or low dilutionist, ranging his remedies from high attenuations to the strong tincture or trituration, but more frequently preferring the lower forms, as often better adapted to impress the affected tissues, and with little of that risk of aggravating existing symptoms which have been held forth with such exaggerated prominence.

The writer has freely quoted from the works of many of the highest authorities, both in the new and old school of medicine; such quotations are duly acknowledged, although he may have used the illustrations and arguments of writers or lecturers which he has unintentionally omitted to note, and which, as the materials for the work have been in course of preparation for many years, he cannot now supply.

The diseases peculiar to the female sex are not specially considered in this work, for several reasons. 1. The author has already issued a manual on the subject, which has reached a second edition, and been extensively circulated. 2. The subject is one of such amplitude and importance as

to demand a separate treatise. 3. It is, further, most undesirable to enter into many details, which are necessary to be intelligent and useful, in a work intended for general readers. This consideration alone seems to justify its isolation in a separate form. At the same time, the subject is by no means overlooked in the present work. Much valuable information may be gathered from the "Materia Medica," where, grouped under appropriate sections, it will be readily available.

In conclusion, the author trusts that the contribution he here makes to the knowledge of the laws of *health*, that element in life which is so essential to its happiness and usefulness, may serve as a faithful guide to its *preservation* to the expiration of the "threescore years and ten, or fourscore years" span of human life; not merely by avoiding those multiform causes which often *immediately* destroy it, but by raising that health to such a high state of perfection in which, with the blood coursing cheerily through its vessels, firm muscles, well-strung nerves, exuberant spirits, and a mind clear as the light, existence is truly enjoyable, and the duties of life are performed with such vigour and zest, as to invest with a charm what would be, with less exalted health, irksome and disagreeable,—the point of view from which he anticipates the greatest amount of good from his publication.

E. HARRIS RUDDOCK.

12, Victoria Square, Reading,
December, 1866.

PREFACE TO THE SECOND EDITION.

In this edition every page has been carefully revised, many entirely new sections have been introduced, while extensive additions have been made throughout the work, all of which have a practical bearing.

There are yet, however, many points which we have not been able to include in this edition, the chief of which are the following :—

1. A short description of various remedies found valuable in practice, and occasionally prescribed in the body of the work, but not included in the list, pages 46–7.
2. A chapter on Toxicology.
3. A clinical index.
4. A longer list of medical and surgical diseases.

As time and opportunity permit we shall arrange the materials for these additions, so as to be prepared to publish them when occasion demands.

HINTS TO THE READER.

The author earnestly requests attention to the following points:—

I. Persons desirous of being able to exercise the best measures for preventing and removing suffering, should *read this manual through, from the first page to the last*, as many important practical points are scattered through the various sections, but which, to economise space, are not repeated, and so may be lost to those who only read detached portions. Even after reading it through, an occasional half-hour spent in studying the manual will facilitate its consultation in cases of urgency. The *novice* in Homœopathy should first read “The Stepping-Stone to Homœopathy and Health,” especially the introductory chapters.

II. When the work is consulted for the treatment of any particular affection, the *whole* section devoted to it should be studied—the symptoms, causes, medicines, and accessory means—before deciding on any course of treatment. One portion of a section often throws light upon another, and hesitation in the choice between two or more remedies may often be removed by considering the causes or symptoms of *the disease* under treatment. As a rule, as far as practicable,

the medicines are prescribed in the order in which they are most likely to be required, or in the order of their importance; this, however, must never be taken for granted, but the remedy or remedies administered strictly according to the present symptoms of the patient.

III. Occasionally, remedies are prescribed without describing the symptoms, or but very imperfectly, by which their use is indicated. Under such circumstances, and whenever in doubt in choosing the remedy, the reader is referred to the MATERIA MEDICA, which forms a very important chapter in the volume. An attentive study of this portion of the work will give a broad and tolerably exact knowledge of many valuable remedial agents, and a measure of skill in using them.

IV. The utility of the work may be greatly increased by having it *interleaved** for recording the results of cases treated, and general observations. Whoever faithfully carries out this hint will accumulate a valuable store of information, the retrospect of which will be interesting and encouraging in the highest degree.

V. Facility of reference may be secured by acquaintance with the arrangements of the Manual; it is divided into parts, chapters, and sections, and the headings on the top of the pages indicate the general and particular disease under consideration. Medical terms are occasionally used, but they are either explained in the text, or in the list of Hard Words which follow the Materia Medica. The index at the

* Interleaved copies may be procured from the publishers.

end of the volume is very copious, and every point of importance may be found by it.

VI. Lastly, the author desires to make this a thoroughly useful Manual; he will therefore be glad to receive suggestions and notes of the experiences of persons using it. Any points likely to be of value, in preparing another edition, of a directly practical character, sent to the author, will be thankfully received, and will aid in making it what he desires it to be, a reliable guide to good health.

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PART I.

INTRODUCTORY.

CHAPTER I.

OBSERVATIONS PERTAINING TO HEALTH (*Hygiene*).

1.—Diet.

HOMŒOPATHY is not a mere system of dietetics. Extended observation proves that the curative action of medicines, chosen according to the homœopathic law, is but little affected by ordinary food or beverages; hence beyond the prohibition of certain articles which stimulate the system too much, clog it in its operations, or impose on weak or diseased organs a task to which they are unequal, homœopathic physicians interfere but little with their patients' diet.

The food of the invalid, however, must be regulated according to the nature, stage, and progress of the malady; therefore, the diet appropriate in acute and chronic diseases will be found prescribed in the following pages.

Respecting the diet of healthy persons, the following suggestions, with occasional modifications, will, in general, be found suitable. The plan is chiefly from Dr. Williams' "Principles of Medicine."

Breakfast at eight, a.m., of bread or dry toast, with a moderate quantity of fresh butter. A new-laid egg, boiled three minutes; or a little mutton, beef, home-fed boiled bacon, cold chicken, or game, may be added for those who make much bodily exertion. A breakfast-cupful of cocoa, deprived of its *excess of oil*, such as is sold by most

homœopathic chemists, or black tea, with milk, may be substituted; but the latter is less nutritious.

Dinner at one, p.m. Wholesome fresh meat and vegetables, carefully proportioned, plainly cooked, served hot, and properly masticated. These should be varied from day to day, with occasional additions, in moderate quantities, of fruit or farinaceous puddings; and fish occasionally substituted for animal food. Highly-seasoned dishes, pickles, salt and dried meats, rich and heavy pastry, and cheese, should be excluded from tables aiming at wholesomeness. Persons who are accustomed to take much exercise, and are weakly, may take a small quantity of malt liquor, never exceeding half a pint: bitter ale is the lightest, and porter or stout is, perhaps, the more sustaining. But, in by far the majority of cases, fermented liquors had better be avoided altogether for dinner, and a few sips of filtered water substituted. Too much cold water lowers the temperature of the stomach, and so interrupts digestion. The habit of taking wine after dinner is one of luxury, not of health; and all that can be said of it, from a hygienic point of view, is *the less the better*. An occasional slight dessert of wholesome fruit is not objectionable.

Tea or supper may be taken at six, p.m., and include one or two cups of black tea, bread or dry toast with butter, fruit, or marmalade, as may be found most digestible or agreeable. If it is the last meal in the day, and the person is not plethoric, and takes a great amount of physical exercise, the meal may include a little light meat, chicken, or white fish.

A different arrangement is necessary for those who dine late—say at five or six, p.m.—as then a *luncheon* should be taken at about one, p.m., which may consist of a small basin of good shin-of-beef soup, with vermicelli, rice, or toasted *bread in it*. But if meat have been taken at breakfast, a

biscuit, or bread and butter, or a small sandwich may suffice; wine and malt liquors are better avoided at this time. At five or six, dinner may be taken, and include the dishes already mentioned. The custom of taking tea, or a simple warm liquid meal three or four hours after dinner, is a very salutary one, as the warm liquid assists the separation and absorption of the chyle from the chyme, which is effected at this period. But the introduction of solid food, especially large quantities of buttered-toast or rich cake, would seriously interfere with this process. Two moderate cups of black tea, with a little milk and sugar, form a useful and agreeable beverage, and serve to remove all acrid materials left undissolved by digestion, and which, if not carried off, might disturb that rest for which the appropriate hour now approaches.

When convenient, the dinner hour may be advantageously deferred until five or six, p.m., so that sufficient time may be devoted to it, and that rest taken after it which the principal meal requires, but which it is often impossible to give to it in the middle of the day. The chapter on "Indigestion" contains almost everything necessary further to be remarked on the subject of diet, and to that the reader is referred.

2.—Brown Bread.

The importance of bread, aptly termed the "staff of life," the common food of all classes, and its abundance being properly regarded as one of our greatest national blessings, seem to justify a brief inquiry into the kind most conducive to health. Wheat contains the following principles, which slightly vary in different samples:—

| | | | |
|------------------|-------------|-----------------------|-------------|
| Water | 11 per cent | Gum | 4 per cent. |
| Gluten | 13 " | Oil | 2 " |
| Starch | 60 " | Bran (the thin exter- | |
| Sugar | 8 " | nal husk) | 2 " |

It is important to remark that these elements are not *uniformly* distributed throughout a kernel of wheat. Immediately beneath the thin external covering is a layer of darkish coloured matter, most rich in gluten, and in which the chief of the oil in the wheat exists in minute drops enclosed in its cells. In the ordinary course of grinding and dressing, a large portion of this is removed from the superfine flour, as it is not so readily reduced to a fine powder, and hence is rejected with the middlings and bran. Beneath this dark layer is the heart of the kernel, which is very white and chiefly composed of starch, and from it the best looking and finest flour is made. This portion is not absolutely destitute of gluten, nor is the dark portion free from starch; but they exist in excess in the parts indicated.

The mineral ingredients of a kernel of wheat are also unequally distributed. They are chiefly, phosphoric acid, potash, soda, magnesia, oxide of iron, sulphuric acid, salt, and silica; and in superfine flour they exist in the proportion of a little over 1 per cent.; in the next quality between 3 and 4 per cent.; still coarser flour, about 5 per cent.; and bran 7 per cent. Thus it will be seen that fine flour contains but a small portion of those mineral ingredients which are found in wheat before grinding, a large portion being cast off with the bran.

But the mineral constituents of the vegetables we consume are as indispensable to the human organization as any other; experiments upon the inferior animals prove that their withdrawal from vegetable food is prejudicial, and that animals so fed perish from starvation. Mineral ingredients form the nourishment for important parts of the animal economy, and, dissolved in the blood, are taken up at points where they are necessary to sustain local parts. Thus phosphates of lime are required by the bones, phosphates of *magnesia* and *potash* by the muscles, soda by the

cartilages, phosphorus by the brain; silica by the hairs and nails; and iron by the red globules of the blood, and black colouring matter within the eye.

The dark portion which chiefly contains the gluten, the most nutritious constituent of the wheat kernel, is almost entirely separated in the process of dressing; while the central is almost wholly starch, and of much less value to the body. In thus rejecting the dark portion which immediately underlies the bran, and is almost entirely removed with it, and used for the food of our cattle, we lose the most nutritious as well as the sweetest portion of the grain.

In the preparation of wheat for the purpose of food, it should be borne in mind that its value depends not upon the quantity of starch it contains, but upon the amount of gluten, and any process which diminishes this element is most objectionable.

The mere bran, without its underlying strata, may be partially removed without much detriment, for though useful in obstinate constipation, it is irritating to the mucous membrane of the alimentary canal of some persons. In such cases the coarse portions of bran may be removed, but not to the extent of divesting it entirely of the bran and the darker portion referred to, and thus to sacrifice its nourishing properties for mere fineness or whiteness of bread.

3.—Cooking.

Much depends, as to the digestibility and nourishing properties of animal food, on the mode in which it is prepared for the table. The following passage from Professor Johnstone's work contains at once the whole theory of the art of cooking meat, and we give it entire, as such knowledge cannot be too widely diffused:—

“In cooking animal food, plain boiling, roasting, and

baking, are in most general favour in our islands. During these operations, fresh beef and mutton, when moderately fat, lose on an average about—

| | In boiling. | In baking. | In roasting. |
|-------------------------|-------------|-------------|--------------|
| 4 lbs. of beef lose ... | 1 lb. | 1 lb. 3 oz. | 1 lb. 5 oz. |
| 4 lbs. of mutton lose | 14 oz. | 1 lb. 4 oz. | 1 lb. 6 oz. |

The greater loss in baking and roasting arises chiefly from the greater quantity of water which is evaporated, and of fat which is melted out during these two methods of cooking. Two circumstances, however, to which it has not hitherto been necessary to advert, have much influence upon the successful result of these and some other modes of cooking.

“If we put moist flesh-meat into a press and squeeze it, a red liquid will flow out. This is water coloured by blood, and holding various saline and other substances in solution. Or if, after being cut very thin, or chopped very fine, the flesh be put into a limited quantity of clean water, the juices of the meat will be gradually extracted, and by subsequent pressure will be more completely removed from it than when pressure is applied to it in the natural state, and without any such mincing and steeping. The removal of these juices leaves the beef or mutton nearly tasteless. When the juice of the meat, extracted in either way, is heated nearly to boiling, it thickens or becomes muddy, and flakes of whitish matter separate, which resemble boiled white of egg. They are, in fact, white of egg or albumen; and they show that the juice of flesh contains a certain quantity of this substance, in the same liquid and soluble state in which it exists in the unboiled egg. Now, the presence of this albumen in the juice of butchers’ meat is of much importance in connection with the skilful preparation of it for the table.

“The first effect of the application of a quick heat to a piece of fresh meat is to cause the fibres to contract, to *squeeze out a little of the juice*, and, to a certain extent, to

close up the pores so as to prevent the escape of the remainder. The second is to coagulate the albumen, and thus effectually and completely to plug up the pores, and to retain within the meat the whole of the juice. Thereafter, the cooking goes on through the agency of the natural moisture of the flesh. Converted into vapour by the heat, a kind of steaming takes place, so that whether in the oven, on the spit, or in the midst of boiling water, the meat is in reality, cooked by its own steam.

“A well-cooked piece of meat should be full of its own juice or natural gravy. In roasting, therefore, it should be exposed to a quick fire, that the external surface may be made to contract at once, and the albumen to coagulate, before the juice has had time to escape from within. And so in boiling. When a piece of beef or mutton is plunged into boiling water, the outer part contracts, the albumen which is near the surface coagulates, and the internal juice is prevented either from escaping into the water by which it is surrounded, or from being diluted and weakened by the admission of water among it. When cut up, therefore, the meat yields much gravy, and is rich in flavour. Hence a beef-steak or mutton-chop is done quickly, and over a quick fire, that the natural juices may be retained.

“On the other hand, if the meat be exposed to a slow fire, its pores remain open, the juice continues to flow from within as it is dried from the surface, and the flesh pines and becomes dry, hard, and unsavoury. Or if it be put into cold or tepid water, which is afterwards gradually brought to a boil, much of the albumen is abstracted before it coagulates, the natural juices for the most part flow out, and the meat is served in a nearly tasteless state. Hence to prepare good boiled meat, it should be put at once into water already brought to a boil. But to make beef-tea, mutton-broth, or other meat soups, *the flesh should be put into cold water,*

and this afterwards very slowly warmed, and finally boiled. The advantage derived from *simmering*, a term not unfrequent in cookery books, depends very much upon the effects of slow boiling as above explained."

It is a cause of regret to find how very extensively the principles expressed in the above quotation are disregarded. Even in well-informed circles, there exists lamentable ignorance or extreme carelessness as to the proper method of cooking animal food so as to utilize its most valuable constituents.

4.—Water.

There is no drink in the world so wholesome, or, to the unperverted taste, so agreeable, as pure water. It is the natural drink of man, is highly favourable to digestion, and may always be taken in moderation when thirst is present. It enters into the composition of the tissues of the body, forms a necessary part of its structure, and performs such important purposes in the animal economy as to be absolutely indispensable for life and health. Water enters largely into combination with our food, and articles that we take as food can only afford nourishment by being dissolved in it. It also acts as a vehicle to convey the more dense and less fluid substances from the stomach to their destination in the body. It gives fluidity to the blood, holding in suspension, or solution, the red globules, fibrine, albumen, and all the various substances which enter into the different structures; for the whole body is formed from the blood. Not only the soft parts of the body, but even the very bones, or the materials of which they are composed, have at one time flowed in the current of the blood, suspended or held in solution in water. To prove how essential water is for the development and maintenance of the animal body, we may here state that a *calculation* has been made which shows that a human body,

weighing 154 lbs., contains 111 lbs of water. Such a fact suggests the necessity of obtaining water pure, and of taking it unpolluted by animal and mineral ingredients. When practicable, water for domestic purposes should be filtered.

Water may be obtained tolerably pure in rain or snow collected in suitable vessels in the open country, away from crowded dwellings and manufactories, where processes are constantly going on which tend to deteriorate the water. Spring, river, sea, surface, well, and mineral water, all contain various substances dissolved in them, which render them, without distillation or filtration, unsuitable for drinking, or even to be used in the preparation of articles of diet. The purest water is obtained from deep wells, bored through the earth and clay down to the chalk (*Artesian Wells*). Even for cooking purposes and bathing, the purest water that can be obtained is the best.

It is a fallacy to suppose that surface well-water is purer than that obtained from deep wells because it is more sparkling and often cooler and clearer. The sparkling of these waters is due to the presence of carbonic acid gas, that acid being derived from the decomposition of animal and vegetable substances.

“The situation of these wells, especially in London, explains the origin of these impure matters. The water that supplies the surface-wells of London is derived from the rain which falls upon the surface of the land, and which percolates through the gravel, and accumulates upon the clay. Now this gravel contains all the soakage of London filth; through it run all the drains and sewers of London, and its whole surface is riddled with innumerable cesspools. Here is the source of the organic matter of surface well-waters, and also the cause of their coolness, their sparkling, and their popularity. In most small towns there is a public pump, and,

when this is near the churchyard, it is said to be always popular. The character of the water is no doubt owing to the same causes as that of London surface wells, the remains of humanity in the churchyard supply the nitrates and carbonic acid of the water.

From this kind of impurity the water of deep wells in London, and of wells cut into rocks which bring their water from a distance from towns, are entirely free. They frequently contain inorganic salts in abundance, but they do not contain organic matters; hence, for drinking purposes, they are very preferable to the waters of surface-wells. A great number of these wells exist in London. There is one attached to almost every brewery in London; and other manufacturers, who need pure water for their operations, sink these wells."—*Lancaster*.

Not one of the least important objects contemplated in the publication of this work is the removal of a foolish prejudice, which unhappily exists in the minds of many, to pure water, an element which God has provided for His creatures with the most lavish abundance; and of promoting, both for internal and external purposes, in health and sickness, a more regular use of this invaluable boon and blessing. Pure water has justly been regarded as an emblem of innocence, truth, and beauty. In a community in which this element shall be used as the chief beverage, and more abundantly for purposes of purification, we may hope to find in the morals of the people reflections of virtue of which water is so vivid a type. And, in a sense which more immediately bears on the subject of this manual, suffering will be more easily controlled by our remedies, and the development of those latent tendencies to disease most effectually prevented, which the habits and fashions of the present age seem to favour.

5.—Air.

proper supply of pure, fresh air is essential for the preservation of life and health. Although life may not be destroyed suddenly by breathing an impure atmosphere, still vital energies are slowly but surely impaired thereby; this is especially the case with growing children, and persons suffering from disease.

R SPOILED BY BREATHING.—It will be sufficient for present purpose briefly to state, that in the process of breathing the air loses its oxygen, the life-giving principle, and receives in exchange carbonic acid gas, a gas not only unable of supporting life, but actually destructive of it.

It is the change effected by a solitary act of breathing; if this process goes on in an ill-ventilated room where several human beings are gathered together, the carbonic acid gas accumulates, usurps the place of the oxygen consumed, and so renders the air less and less fit for the purposes of the renewal of life. Carbonic acid gas does not support combustion; hence a lighted candle partially or completely surrounded by it, burns slowly or goes out; so with human beings, when more or less completely exposed in an atmosphere charged with this gas; all the functions of the body are tardily and imperfectly performed; muscular tissues are enfeebled, the breathing becomes oppressed, the head aches, and in extreme cases, life is extinguished amidst sufferings of the most distressing nature.

BY SLEEPING ROOMS.—The fact that carbonic acid gas is inimical to health and life, shows the importance of making provision for its uninterrupted removal from our schools and places of assembly, and above all, from our living rooms and *sleeping rooms*, in which we pass so large a portion of our lives. *Airy, well-ventilated sleeping apartments should be ranked with the most important re-*

quirements of life, both in health and disease. Bed-rooms, in which about one-third of human existence is passed, are generally too small, crowded, and badly ventilated. Often the doors, windows, and even chimneys are closed, and every aperture carefully guarded so as to exclude fresh air. The consequence is, that, long before morning dawns, the atmosphere of the whole apartment becomes highly noxious from the consumption of its oxygen, the formation of carbonic acid, and the exhalations from the lungs and the relaxed skin. Under such circumstances, the sleep is heavy and unrefreshing, partaking more of the character of insensibility. Were there due provision for the uninterrupted admission of fresh air, and the free escape of impure air, the sleep would be lighter, shorter, and more invigorating. In nearly every instance, the door of the bed-room may be left open, and the upper part of the window let down a few inches—a greater or less extent according to the state of the weather—with perfect safety. A current of air may be prevented from playing on the face of the occupant, by placing the bed in a proper situation, or by suspending a single curtain from the ceiling. We may be permitted to add, we always sleep with a portion of the top sash of the window down, except in very wet, windy, or foggy weather; even then the door of communication with the adjoining room or landing remains open. During foggy weather, the apertures directly communicating with the external air may be closed.

The importance of the subject is very correctly and strikingly put by a medical writer of the last century. “If any person,” he remarks, “will take the trouble to stand in the sun, and look at his own shadow on a white plastered wall, he will easily perceive that his whole body is a smoking mass of corruption, with a vapour exhaling from every part of it. This vapour is subtle, acrid, and offensive to the

smell; if retained in the body it becomes morbid; but if re-absorbed, highly deleterious. If a number of persons, therefore, are long confined in any close place not properly ventilated, so as to inspire and swallow with their spittle the vapours of each other, they must soon feel its bad effects." Unpleasant as it is to dwell on such a subject, it is yet true that the exhalations from the human lungs and skin, if retained and undiluted with a continuous supply of oxygen, are the most repulsive with which we can come in contact. We shun the approach of the dirty and the diseased; we hide from view matters which are offensive to the sight and the smell; we carefully eschew impurities in our food and drink, and even refuse the glass that has been raised to the lips of a friend. At the same time, "we resort to places of assembly, and draw into our mouths air loaded with effluvia from the lungs and skin and clothing of every individual in the promiscuous crowd: exhalations, offensive to a certain extent, from the most healthy individuals, but which, rising from a living mass of skin and lung in a state of disease, and prevented by the walls and ceiling from escaping, are, when thus concentrated, in the highest degree deleterious and loathsome" (*Bernan*).

CAUTIONS AS TO BADLY VENTILATED CHURCHES, ETC.—The great practical inference is, that the only means of preventing people from poisoning themselves and others is to ensure their being constantly surrounded by fresh air; otherwise, low fevers may result, and such acute diseases as scarlatina, measles, small-pox, etc., may be excited in epidemic forms, marked by a class of symptoms described in medical terms as "typhoid" or malignant. The air of an apartment containing several human beings, if unchanged, not only becomes charged with carbonic acid gas, but also, as before stated, impregnated with animal particles which fly off from the skin and lungs, so minute as scarcely to be

detected by the microscope, but capable of decomposition; and, taken by the breath into the lungs, may be absorbed and develop the worst forms of scrofula and consumption. But if these particles are given off from bodies affected with, or recovering from, small-pox, scarlet fever, whooping-cough, typhus, etc., they will exert a most injurious influence upon the health, and probably generate in other bodies diseases like those from which they emanated. It is most important to bear in mind that the assembly in an ill-ventilated church, court of law, school-room, theatre, ball-room, or evening party, may include in its number some as yet unsafe convalescents from these or kindred diseases. The only security we can suggest is, as far as possible to avoid all places of public resort or private gatherings in which the most ample provision is not made for the admission of fresh air, and for the uninterrupted escape of air spoiled by carbonic acid gas or animal exhalations.*

6.—Light.

The importance of sunlight for physical development and preservation is not, it is believed, duly appreciated. Women and children, as well as men, in order to be healthy and well developed, should spend a portion of each day where the solar rays can reach them directly. Just as sprouts of potatoes in dark cellars seek the light and are colourless till they come under its influence, and as vegetation goes on but imperfectly in places where sunlight does not freely enter, so the cheeks of children and adults who live almost entirely in dark kitchens, dingy alleys, and badly-lighted workshops, are pale, and their bodies feeble. Houses are only fit to be occupied at night that have been purified and dried by the solar rays during the day.

*See "Ventilation in Cold Weather," in "The Homœopathic World," *January, 1866.*

It has been pointed out by Dr. Ellis that women and children in the huts and even log cabins of America, which contain only one or two rooms, remain healthy and strong; but that, after the settler has built a house, and *furnished it with blinds and curtains*, the women and children become pale-faced, bloodless, nervous, and sickly; the daughters begin to die from consumption, and the wives from the same or some disease peculiar to women. At the same time, the adult males, who live chiefly out of doors, continue healthy.

The value of sunlight, with its accompanying influences, for animal development, may be illustrated by such facts as the following:—In decaying organic solutions, animalcules do not appear if light is excluded, but are readily organized when it is admitted. The tadpole, kept in the dark, does not pass on to development as a frog, but lives and dies a tadpole, and is incapable of propagating his species. In the deep and narrow valleys among the Alps, where the direct rays of the sun are but little felt, cretinism, or a state of idiocy, more or less complete, commonly accompanied by an enormous goitre, prevails, and is often hereditary. Rickets, or deformities, crookedness, and enlargement of the bones, are very common among children who are kept in dark alleys, cellars, factories, and mines.

During the prevalence of certain epidemic diseases, the inhabitants who occupy houses on the side of the street upon which the sun shines directly, are less subject to the prevailing disease than those who live on the shaded side. In all cities visited by the cholera, the greatest number of deaths took place in narrow streets, and on the sides of those having a northern exposure, where the salutary beams of the sun were excluded. It is said that the number of patients cured in the hospitals of St. Petersburg was four times greater in apartments well lighted than in confined,

and dark rooms. This discovery led to a complete reform in lighting the hospitals of Russia, and with the best results.

Except in severe inflammatory diseases of the eyes or brain, the very common practice of *darkening the sick room* is a highly prejudicial one. The restorative influence of daylight is thus excluded, and also the grateful and natural succession of light and darkness, the two always making up the same period of twenty-four hours, which favours sleep at the appropriate time, and divests the period of sickness of the monotony and weariness of perpetual night.

7.—Exercise.

Exercise strengthens and invigorates every function of the body, and is essential to health and long life. No one in health should neglect to walk a moderate distance every day in the open air, if possible in the country, where the invigorating and balmy air of nature can be freely inhaled. *Walking* is the healthiest as well as the most natural mode of exercise. Other things being equal, this will ensure the proper action of every important function. The walk for health should be diversified, and if possible include ascents and descents, and varying scenery; and be alternated, when circumstances admit of it, with riding on horseback, active gardening, or similar pursuits, and with gymnastics and games of various kinds. Athletic sports and manly exercises should form a part of the education of youth, nor should they be neglected in after life, especially by persons of sedentary pursuits. Many aches and pains would rapidly vanish if the circulation were quickened by a judicious and regular use of the muscles. These modes of exercise, practised moderately and regularly, and varied from day to day, are much more advantageous than the exciting, immoderate, and irregular exertions which characterize the ball-room, *the hunting-field*, and even the cricket-ground or the rowing

match. These exercises are sometimes pursued so violently as to be followed by severe and permanent injury to the constitution. In the case of very feeble and infirm people, carriage exercise, if it may be so called, and frictions, by means of towels and bath gloves, over the surface of the body and extremities, are the best substitutes for active exertion.

The best periods for exercise are, when the system is not depressed by fasting or fatigue, or oppressed by the process of digestion. The robust may take exercise before breakfast; but delicate persons, who often become faint from exercise at this time, and languid during the early part of the day, had better defer it till from one to three hours after breakfast. An evening walk in fine weather is also advantageous. Exercise prevents disease by giving vigour and energy to the body and its various organs and members, and thus enables them to ward off or overcome the influence of the causes which tend to impair their integrity. It cures many diseases by equalising the circulation and the distribution of nervous energy, thus invigorating and strengthening weak organs, and removing local torpor and congestion.

8.—Clothing.

The adoption of artificial clothing by man may be stated to serve three purposes, the regulation of temperature; protection from friction, insects, and dirt; and ornament.

In this climate clothing is chiefly employed for warmth, which purpose is secured by moderating or restraining the escape of caloric from the body. Articles of clothing have no power in themselves of generating heat, and are designated as warm or cool just in proportion as they restrain or favour the escape of caloric. Thus a lady's muff and a marble floor are ordinarily of the same temperature; but the sensation produced by each is widely different, because

the animal heat is retained by the muff, and rapidly carried off by the marble. Hence for clothing we select those substances which conduct heat least, such as the wool of sheep, and the silk produced by silk worms, which are superior, as non-conductors, to cotton or linen. In this country we have recourse chiefly to the former in winter, and to the latter in summer, cotton and linen garments being coolest, the linen being cooler than the cotton.

There are several practical errors on the subject of clothing, committed perhaps by a majority of persons, to which we may briefly direct attention. "The first and most obvious of these," says Dr. Baikie, "is wearing too much clothing indoors or in bed, thereby both exhausting the natural powers of the skin and exposing its action to a sudden check on going out into the cold air. This forms one of the principal objections to the almost universal use of flannel, *worn next the skin*, and kept on even during the night, as is the practice with many people. The skin is thus unnaturally excited, and in course of time loses its natural action; or, on the other hand, becomes so sensitive, as to have its action checked on the slightest exposure. I venture to propose my own plan of clothing as suitable to elderly people and those of delicate constitutions in general.

"1. In summer as well as winter, I wear a cotton garment next the skin, thin in summer, stouter in winter; over this a very light silk shirt for summer, and a thicker one in winter. I also wear a narrow strip of flannel, lined with cotton, round the abdomen in summer, replacing it by a thicker one, made so as to double over the front of the belly in winter; my ordinary shirt is always of cotton.

"2. In the beginning of autumn I add a light-coloured flannel shirt *over* my ordinary one, leaving the front open, or wrapping it across according to circumstances. When the winter fairly sets in, I replace this by a stout flannel shirt;

but in both cases, I take this off on dressing for dinner, so as to have the full benefit of it while exposed to cold in the *open air*; this I think of great importance; and I never use anything else than a light cotton shirt *to sleep in*, and strongly object to the common practice of sleeping in flannel."

The *colour* of clothing is not unimportant, light being preferable for the following and other reasons:—(1.) White reflects the rays of heat which the black absorbs; at the same time it impedes the transmission of heat from the body. Light-coloured clothes are therefore best both for winter and summer, retaining the heat in the former, and keeping it off in the latter. (2.) Particles which emanate from diseased bodies, unhealthy accumulations, or miasmatic districts are much more readily absorbed by dark than by light clothing. Therefore those who are exposed to contagious influences, or the sick room, or in unhealthy neighbourhoods, should wear light clothing. Dark clothes favour the transmission of contagious disease, from house to house, much more readily than light ones.

Another point deserving attention is, that of *frequent changing and cleansing of clothes*. The practice of adopting dark-coloured instead of light-coloured garments has frequently its origin in economy, dark clothes tolerating an amount of dirt inadmissible in light ones. It should be recollected that dark garments contract dirt after being worn a little time as much as light, and if not changed and cleansed may favour the production or spread of disease.

Another evil of far greater moment, is the adoption by ladies of *extended skirts*, a fashion, not merely inconvenient, but one of risk, exposing them to the danger of the most horrible of deaths. The returns of the Registrar-General reveal the appalling fact, that eight persons are burned to death every day in England and Wales, a large proportion

resulting from the uncontrollable dimensions of the extended skirt. In addition to the lives thus immediately sacrificed, a far greater number survive, after enduring sufferings of the most acute description, and often crippled for life. Is it not, therefore, a question deserving serious consideration, whether the fashion of wearing extended dresses is not ~~very~~ unsuited to a country where fires, gas, and candles are in general requisition?

In connection with this subject it may be well to advert to the inconvenience of heavy thick clothing, the tissues of which are close and firm. Materials for clothing should be chosen the textures of which are loose and porous, and permit air in their interstices, air being a bad conductor.

The advantage of having numerous light instead of few heavy coverings to the skin are these—the stratum of air interposed between each layer of covering being a non-conductor, they are relatively much warmer than a much greater thickness in fewer pieces; 2ndly, they can be more easily laid aside to suit changing temperature; 3rdly, being lighter, they are less apt to overheat the wearer, and thus avoid the chance of a consequent chill.”*

Other points may be briefly referred to. Summer clothes should not be put on too soon, or winter ones too late. Tight-fitting hats and shoes are destructive to health. So are stays. The body is strong enough to support itself; and stays often bring on diseases of the lungs and other important organs. The muscles of the body were intended to sustain it erect, but when stays are applied, they soon become indispensable, by superseding the action of the muscles; and in accordance with a well-known law of the

* In a country one of the most changeable climates in the world, the variation of temperature being frequently 33 or 40 degrees, this is the mode adopted by the natives to protect themselves: a working man will often appear in the morning with 10 or 12 light jackets on, one over the other, which he gradually removes as the day gets warm, resuming them again towards night.

muscular system, when they cease to be used they cease to grow, and become insufficient for the discharge of their natural functions. Not only so, stays are directly injurious; and it is a well ascertained fact, that cases of organic disease have arisen from, or at least were aggravated by, their use.

Finally, it may be stated that the clothing of children, whose feeble frames are less able to resist or endure cold than those of adults, is generally insufficient. When a baby is divested of its long clothes, it is in danger of being insufficiently clad, the danger increasing when it can run alone, and is more exposed to atmospheric influences. It cannot be too strongly impressed upon those who have the charge of children that the practice of leaving those parts exposed, which when grown up we find it necessary to clothe warmly, especially the lower limbs and abdomen, is a frequent cause of retarded growth, inflammation, mesenteric disease, consumption, etc.

9.—Bathing.

The cold bath, often recommended in this work, when practised in a reasonable manner, is a most valuable aid to health. As a general rule, once a day, certainly not less frequently than every second morning, every person in health should bathe or sponge the whole body with cold water, immediately following it by friction and exercise, to promote the reaction. This tends to health, just as opening the window lets fresh air into a room. Merely washing the hands, face, and neck, is by no means sufficient; the entire surface of the body requires the application of water, not only for the purpose of cleanliness, but as a means of invigorating the capillary circulation, and so fortifying the system as to enable it to resist atmospheric vicissitudes. The secret of attaining these ends consists in employing the cold in such

a manner and degree, and in the body being in such a state before and after the application, as that the reaction or glow shall be most perfect. The cold sponge-bath may be adopted with safety by almost any one, the shock not being too great, and good friction rapidly causing agreeable warmth. The best time for a cold bath is on rising from bed, before the body has become chilled. Cold bathing should not, therefore, be practised when the body is cold or cooling, or when it is exhausted by exertion or fatigue, or is naturally too weak, or when the skin feels chilly, until this feeling has been removed by friction or exercise. A bath should not be taken too soon after a meal, for then the circulation should be undisturbed, as the stomach requires all its power to digest the food; nor should the time spent in the bath be too long; that may vary, according to circumstances, from about one to four minutes.

TEMPERATURE.—The water of the bath should not be colder than 59° , ranging from this to 64° , according to the season, and according to the temperature of the room. The temperature of the bath-room should be 64° or 65° ; if lower than this the water should be a little warmer, and if the room is *cold*, then the water should be 68° , and the bathing process performed as quickly as possible. The temperature of the bath-room is a point of considerable importance, and it can only be accurately measured by a thermometer; one of these useful instruments should therefore be kept in every bath-room.

SPONGE.—A large sponge, of good quality, is a very useful adjunct to a bath-room, as by its use a much larger quantity of oxygen can be introduced into the skin than can be effected by any other means, and thus one of the prime conditions of bathing is secured.

If the important conditions stated above are disregarded, *the immediate depressing effects* of the bath will be con-

tinned; there will be no glow of reaction, and subsequent chilliness and dulness will ensue. An occasional addition of sea-salt to the water, as recommended in the next paragraph, communicates a stimulating property favourable to reaction. A similar effect is likely to result from the force or shock with which the water is applied, and probably a shower-bath is the most efficient, as it most excites those forcible and deep inspirations which are the most efficient cause of the reaction which follows. The reaction is further promoted by vigorous friction over the entire surface with coarse large towels, which operate both by stimulating the cutaneous vessels, and also by muscular exertion, which promotes the more energetic action of the heart. A brisk walk after the bath also tends to promote reaction.

ADDITION OF SEA-SALT TO THE BATH.—"If the back or hips are weak, and also occasionally in good health, the addition of a solution of sea-salt to the water in the bath will add greatly to its tonic properties. Sea-salt is the residuum of evaporated sea-water; and if it be added in such quantity to a bath that the mineral ingredient is equal to that contained in salt water, it will be far more efficacious than a simple fresh-water bath, as it combines the advantages of temperature with the stimulating action of the water upon the skin, imparted by the saline matter which it holds in solution. Sea-salt can now be very generally obtained, and at a cheap rate; and thus persons residing at a distance from the coast may enjoy, to a certain extent, the advantage and luxury of a sea-bath. In the absence of sea-salt, a handful of bay-salt, or of common salt, may be added to the water." *

Such a bath, taken regularly in the morning, is conducive to health in two ways:—It inures the body to a degree of cold greater than it is likely to be exposed to during the rest

* *The Lady's Manual of Homœopathic Treatment.*

of the day, and so proves most serviceable in protecting it from atmospheric influences; and it tends to remove irregularities in the circulation, and, by exciting the healthy action of the skin, may aid that organ in removing disease.

It is not everyone, however, who can with safety practise bathing in the manner just now pointed out. Cold bathing would be very hazardous, not only to patients who are extremely weak, or who have any organic disease, especially of the heart or lungs, but there may be some idiosyncrasy or condition of the constitution peculiar to the individual which would render such a course the very reverse of beneficial. Patients who have any ground for doubt on the subject should consult their medical attendant. Caution is more particularly necessary in infancy and old age. The adaptation of the cold bath to individual cases may often be determined by the following criterion:—If, after a bath, the patient remains chilly, languid, and dejected, or suffers headache, it had better be discontinued; but if the sense of cold rapidly passes off, and a glow of warmth and animation of spirits succeed and continue for some time, the cold bath is almost sure to be productive of good.

The *warm bath*, to the feeble and exhausted frame, is often very beneficial, and a great luxury. The temperature may be varied according to the sensations of the patient, but as a rule should be that of the temperature of the blood—96° to 98°; if higher than 98°, the bath may be followed by a profuse perspiration, which weakens the system. Warm bathing, however, including the hot air or Turkish bath, except as a remedial agent, and prescribed by a medical man, is generally prejudicial.

.For suggestions on various forms of baths, and their admissibility to persons in disease, consult subsequent portions of this volume; especially under “Consumption,” and “Cold in the Head.”

10.—The Wet Pack.

As we have often prescribed the wet pack in the following pages, we here offer a brief description of the process. A little practice will enable any one to carry out the directions with ease. Whenever indicated, we can assure our readers, from extensive practice, they need not hesitate to adopt it, as the wet pack is both salutary and comforting. Spread a macintosh sheet or stout blanket or quilt on a mattress, and over it, leaving a margin at the head, spread a thick linen sheet, *wrung* out of *cold* water. The wringing is best effected by two persons, one taking hold of either end, the sheet being doubled, and twisting as long as any water can be got out. In fevers, the colder the water is the better; for very delicate persons with feeble reaction, water at 68° may be used. The patient is to be extended on his back naked on the wet sheet, so that the upper edge covers the back of the neck, but the lower one is to project beyond the feet; holding up the arms, one side of the sheet is to be thrown over the body and tucked in; the arms are now placed by the sides, and the other part of the wet sheet is thrown over all, and tucked rather tightly in, turning in the projecting ends under the feet. The macintosh or blanket is then to be brought over all the sheet, and well tucked in round the neck, at the sides, and over the feet, so as completely to exclude the air. A stout quilt or extra blanket is to be put over all. In a short time the patient will become warm; the sensation is most agreeable, especially in fevers. He may remain in the pack three quarters of an hour to an hour, then be put into a shallow bath of water at 64°, well washed, dried, and put to bed. It may be repeated once, twice, or thrice a day, according to circumstances and the violence of the attack. Perspiration may be encouraged by giving sips of cold water. If the head becomes con-

gested, or the face flushed while in the pack, a cold compress should be applied over the forehead. The wet pack is invaluable in the *early* stages of all fevers; and in *scarlatina*, *measles*, and *small-pox*, it assists in bringing out the eruption.

11.—The Influence of Professions and Occupations on Health.

Whatever may be the particular employment of an individual, it can rarely be divested of certain effects, more or less prejudicial to his general health. Occupations which permit of the free use of pure air and moderate muscular exercise, with exemption from want or anxiety, are those most conducive to a healthy, long life. Statistical tables afford evidence of the greater longevity of some pursuits as compared with others. The following table from Tarbell's "Sources of Health," published at Berlin in 1834, is on too limited a scale for general application, but is undoubtedly a close approximation to the truth.

| | | |
|------------------|----|---|
| Of 100 Clergymen | 42 | attained the age of 70 years and upwards. |
| „ Farmers | 40 | „ „ |
| „ Commercial Men | 35 | „ „ |
| „ Military Men | 33 | „ „ |
| „ Lawyers | 29 | „ „ |
| „ Artists | 28 | „ „ |
| „ Teachers | 27 | „ „ |
| „ Physicians | 24 | „ „ |

The first half in the above list, with the exception of the clergymen, are necessarily much exposed to the air, and take physical exercise; but the other half, with the exception of the physicians, are chiefly confined in-doors, engaged in sedentary occupations. The difference between the longevity of the clergyman and the physician may no doubt be *accounted for by* the fact, that the literary pursuits of the

former are not of so multifarious and unremitting a character as to prevent sufficient out-door exercise being taken; the nature of his studies may be regarded as favourable to a long life, by inspiring influences conducive to cheerfulness, hope, and serenity. The physician, on the other hand, is exposed to influences most adverse to health; he has frequently to encounter the poison of infectious disease, and is often unable to observe those rules and precautions which it is his duty to enforce in the practice of others; his responsibility often involves extreme mental anxiety; and his almost incessant occupation of both mind and body, no doubt account for his comparatively short life. There are, however, instances of medical men attaining an advanced age. Harvey reached the age of 81; Hoffmann, 83; Hahnemann, 88; Heberden, 93; and Hippocrates, 109. The last individual was much engaged in travelling, and passed much more of his time in the country than in crowded cities.

WHY EMPLOYMENTS ARE UNHEALTHY.—The circumstances which operate in rendering occupations unhealthy, are chiefly the following: deficiency of daylight and pure air; a bad position of the body during employment; and the inhalation of mechanical or poisonous substances.

Abundance of sunlight is of great importance in workshops and offices, particularly where young people are employed. As already pointed out, patients make better and more rapid recoveries in well-lighted hospitals; and very serious cases are generally placed in the sunny side of such buildings. If, therefore, persons are more likely to regain health in such apartments, we may fairly conclude that the health of a person will be better preserved, if employed in a large well-lighted workshop or office. Windows should be frequently cleaned, and the walls and ceilings whitewashed at least twice a year.

The sedentary occupations, such as are followed by book-

Keepers, milliners, tailors, shoemakers, and many others, are often most unfavourable to health, as the sitting posture is generally combined with an inclination to lean forwards, so as to compress the chest and stomach. To a limited extent, the hurtful consequences of such postures may be avoided by occasionally changing to a standing position when at work, and by taking out-door exercise during the hours of relaxation. Plenty of healthful recreation in the open air is the best corrective of the injurious consequences of sedentary employments.

Occupations, however, are only injurious accidentally, a certain amount of work being advantageous for man, both in regard to his body and his mind. Industry alone can preserve anything like a healthful contentment of the spirits, or dispel melancholy from the mind; or remove those dissatisfied and restless cravings which prey upon the unemployed. Industry, moreover, is ordinarily followed by rewards such as are esteemed most desirable even by the mere worldling; and when wealth accumulates or honour flows in upon a man, through God's blessing on his honest industry, it is immeasurably more precious to him than if ancestors had bequeathed it. True, there are districts of the earth where but little demand is made on the labours of the husbandman, the mountains and the valleys yielding almost spontaneously their rich produce. But the people of districts whose soil possesses the greatest fertility—Italy and Spain—are often sunk to the lowest condition in those mental, social, and moral qualities, which constitute the chief glory of a nation. Released from the necessity of industry, the body becomes enfeebled, the mind weak and vacillating, the sensuous passions preponderate over the intellectual powers; and man, in such circumstances, presents the humiliating spectacle of a mere stagnant humanity, *excited into action only by the lowest instincts of his nature.*

Having regard to the material frame of man, the point that comes especially within our province, we commend industrious employment, which, when followed under the conditions already indicated, are conducive to health and long life. The body was formed for active duties, and the performance of these is indispensable alike for perfect physical development, for health, and happiness. The muscles, the tendons, the ligaments, and even the bones, require exercise, and become deteriorated in structure, and feeble from indolence. Hence the vertebræ (backbone) of a carpenter, or of any one who has followed a similar occupation, are larger and also much heavier in proportion to size, than those of a shoemaker or tailor. It is stated of a person who, in consequence of a trifling lameness, took up the occupation of begging, and sat almost wholly during the rest of his life, using the limb as little as possible, that the thigh-bone of this limb was found to be considerably less in circumference, and shorter than the other. From more than one point of view, then, it appears that the real good of life does not consist in being exempt from the necessity of daily toil, and that happiness is more equally distributed than would seem on a cursory glance on the surface of society. Providence, who has made industrious employment the heritage of man, confers at least daily bread, contentment, and physical well-being, as the reward of industry; while He would seem to have ordained that the carriage, the luxurious dwelling, and the rich and varied edibles, shall tend in a measure to deteriorate the health and blight the happiness of those possessing them. The man who has nothing to do is ever restless, and craving for a good not yet enjoyed; his pleasures lose their character as such by becoming the business of his life, and satiety produces disgust. In brief, the industrious man, if his labours are not too exhausting, or carried on in an unhealthy atmosphere, but relieved by daily out-door exer-

cise and relaxation, will pass a happier life, and live longer than the indolent man; and though some occupations or professions may not be directly promotive of health, industry is man's best estate.

CHAPTER II.

SIGNS AND SYMPTOMS OF DISEASE.

To recognise fully the various evidences of an unhealthy action of the system, a long course of study, including both healthy and morbid anatomy, is necessary. If the several points referred to in this chapter are carefully examined, with the different cases which come under our notice, they will aid us in arriving at a tolerably accurate idea of the nature and severity of the disease we have to treat. The following are several of the more common and well-known diagnostic signs.

1.—The Pulse.

The pulse is produced by the blood forced into the *aorta*, and thence into the various arteries of the body, by each contraction of the left ventricle of the heart; its character will consequently be modified by the condition of the heart, the blood-vessels, and of the blood itself.

In feeling the pulse, great gentleness should be observed, and it should be done as easily as possible, so as not to excite the action of the heart, which would defeat the object in view. The pulse may be examined in any part where an artery is so close to the surface that its throb can be plainly felt; but in general the most convenient locality is at the wrist. While examining the pulse, there must be no pressure exerted upon the artery in any part of its course by *tight sleeves*, ligatures, etc. The examiner should place

three fingers just above the root of the thumb and the joint of the wrist, with his thumb on the opposite side, so as to be able to regulate the pressure at will. Its frequency may thus be measured by the seconds' hand of a watch; but its peculiar characteristics, as indicative of various phases of disease, can only be appreciated by the educated hand of the medical man. By this method we can detect its rhythm, its fulness, or softness; whether by compression it may be rendered almost imperceptible; whether it is strong and bounding, forcing the fingers almost from the arm; or hard, or small and wiry, like the vibrations of a string; or intermittent, striking a few beats, and then apparently stopping for one or two beats; or whether the pulsations flow into each other, small and almost imperceptible.

HEALTHY PULSE.—The healthy pulse may be described as uniform, equal, moderately full, and swelling slowly under the fingers; it is smaller and quicker in women and children. In old age, the pulse becomes hard, owing to the increased firmness or structural change in the arterial coats. The average number of beats of the healthy pulse in the minute, at different ages, is as follows:—At birth, 140; during infancy, 120 to 130; in childhood, 100; in youth, 90; in adult age, 75; in old age, 65 to 70; decrepitude, 75 to 80.

The healthy pulse is influenced, however, by the following and other conditions, which should be considered in estimating the character of the pulse as a diagnostic sign. It is faster in the female than in the male, the former exceeding the latter by from six to fourteen beats; but this difference only occurs after about the eighth year. It is quickened by exertion or excitement; it is more frequent in the morning, and after taking food; it beats faster standing than sitting, and sitting than lying; but it is diminished by cold, sleep, fatigue, want of food, and by certain drugs, especially *Digitalis*.

PULSE IN DISEASE.—In estimating the differences of the pulse as signs of disease, allowances must be made for those sudden irregularities which are often observable under transient excitement or temporary depression.

The rapid pulse, especially if strong, full, and hard, indicates inflammation or fever; if small and very rapid, it points to a state of great debility, such as is often present in the last stage of typhoid fever.

The jerking pulse is marked by a quick and rather forcible beat, followed by a sudden, abrupt cessation, as if the direction of the wave of blood had been reversed, and is indicative of structural disease of the valves of the heart.

The intermittent pulse is that in which a pulsation is occasionally omitted, and is frequently owing to some obstruction in the circulation in the heart or lungs, or inflammation or softening of the brain, apoplexy, etc. In minor degrees, indigestion with flatulence may produce it.

The full pulse occurs in general plethora, or in the early stages of acute disease; while the *weak pulse* denotes impoverished blood, and an enfeebled condition of the system.

When the pulse resists compression, it is said to be *hard*, *firm*, or *resistant*; if it is small as well as hard, it is said to be *niry*.

2.—The Tongue.

This organ affords important indications:—*Dryness* points to diminished secretion, and is common in acute and febrile diseases; *moisture* is generally a favourable sign, particularly when it succeeds a dry or furred condition. A *red tongue*, that is, preternaturally red, is common in the course of the eruptive fevers; but in gastric and bilious fevers, and in bad cases of indigestion, the redness is often limited to the edges and tip. When the tongue is *livid* or *purple*, there is *defective oxygenation* of the blood. The *furred tongue*,

is the most marked, and is common in inflammation and irritation of the mucous membranes, in diseases of the brain, in all varieties of fever, and in almost all acute and dangerous maladies. It should be added, some persons have usually a coated tongue on rising, without any other symptom of disease. A uniformly white-coated tongue is not very unfavourable; a yellow coat is indicative of disordered action of the liver; a brown or black, of a low state of the vital powers, and contamination of the blood. The gradual cleaning of the tongue, first from the tip and edges, shows a tendency to health; when the fur separates in patches, leaving a red glossy surface it is less favourable; when the crust is rapidly removed, leaving a raw or dark-coloured appearance, the prognosis must be unfavourable.

3.—Breathing.

Healthy inspiration is performed with great ease, by a nearly equal elevation of the ribs and enlargement of the chest; expiration is the natural return of the chest to its proportions during rest.

Dyspnœa, or difficult breathing, may result from spasm of the air passages, as in asthma; the presence of tumours, or false membranes, as in diphtheria and croup; or great swelling of the tonsils, or inflammation of the glottis; all of which obstruct the entrance of air to the lungs, and so occasion dyspnœa. Disease of the nerves which preside over the respiratory movements, or in that part of the nervous centres from which they proceed, may also produce serious difficulty of breathing. In pleurisy, fracture of the ribs, apoplexy, and cases of great exhaustion, when an insufficient supply of blood is sent to the great nervous centre, the brain, the respiratory movements are deranged, and otherwise greatly or even fatally obstructed.

The *odour* of the breath is also characteristic, and may be

most disagreeable, as the result of want of attention to cleanliness of the mouth and teeth, indigestion, putrid sore throat, etc. During the eruptive fevers, and in typhoid and pestilential fevers, it is both offensive and infectious.

4.—Pain.

This is often a most important indication of the nature and seat of disease, pointing to an interruption of the harmony of the bodily organs; the severity and persistency of the pain being in proportion to the disorganizing violence of this interruption. When attended with a throbbing sensation, consequent upon the heart's action, it is called *pulsating pain*; when with a feeling of tightness, *tensive*; when with heat, *burning*. Inflammatory pain is continuous, grows gradually worse, and is aggravated by touch or pressure. *Nervous* pain may be recognised by its disposition to follow a certain course, without being rigidly limited to one particular part; by its being subject to perfect intermissions; and by the suddenness with which it comes and goes. *Spasmodic* pain is mitigated by pressure, by frictions, and by applications of heat; it comes on suddenly with greater or less severity, terminating abruptly. Sometimes pain occurs, not in the part diseased, but in a distant one. Inflammation of the liver generally first shows itself by pain in the right shoulder; inflammation of the hip-joint, by pain in the knee; stone in the bladder, by pain at the end of the penis; disease of the heart, by pain down the left arm, etc.

5.—The Skin.

In health the skin imparts to the touch the sensation of an agreeable temperature, with just sufficient moisture to preserve its softness; it is also elastic, smooth, and neither too tense nor loose. A *harsh, dry, burning heat* of the skin is indicative of fever, and must ever be regarded as unfavourable.

favourable, especially in inflammatory conditions of internal organs. If this condition be followed by *perspiration*, and at the same time by an improvement in the general symptoms of the patient, it is a favourable indication. Great relief is usually experienced on the supervention of the sweating stage in ague, rheumatism, and inflammatory fevers. On the other hand, complications may be feared if perspiration ensue without any amelioration of other symptoms.

Partial or local perspirations indicate a deranged condition of the nervous system, or an affection of the organs contained beneath the perspiring surface. If perspirations occur after trifling exertion, they point to excessive weakness. Night sweats, of frequent occurrence, not only show debility, but when preceded by chills and fever, indicate a hectic and consumptive state of the constitution.

The *colour* of the skin is also diagnostic. A bluish tint of the skin indicates structural disease of the heart. A yellow colour points to biliary affections. A rich blush of the cheeks, especially if it be circumscribed, and the surrounding parts pale, indicates an irritable condition of the nervous system, or a tuberculous cachexia.

6.—The Urine.

The urinary organs are the kidneys and bladder, with their appendages. The kidneys secrete the urine from the blood, and by this process the blood is relieved of many impurities, which if retained would give rise to disease in the whole system. The secretion of the kidneys reaches the bladder through little channels (*ureters*), and when the bladder is filled, the urine is discharged, through the urinary canal (*urethra*).

Healthy urine is of a brightish yellow or straw colour, a tint darker in the morning than in the afternoon, yielding a

slight ammoniacal smell, devoid of unpleasant odour, and precipitating no deposit on standing, or only the merest trace of mucus, or of urates from a low temperature. In advanced age the urine becomes darker and slightly offensive; it is darker in persons who lead a very active life; different varieties of food also produce a marked effect both on the colour and odour of urine. The stream of urine should be round and large, and it should be passed about five or six times in twenty-four hours without any pain or straining.

The average *specific gravity* of healthy urine is 1,020, being in excess of water, which is the standard (1,000).

In disease, the urine presents many varieties, and furnishes valuable indications to the pathologist. Thus, it may be of a dark yellow or saffron colour, as in jaundice, or derangement of the liver; it may be red or high-coloured, and scanty, with quickened pulse, as in fever; it may be bloody or slimy, as in the affections of the kidneys or bladder; it may be watery (pale) and copious, as in nervous and hysterical ailments; it may be heavy, muddy, or of a purple colour, showing an unfavourable condition of the system; or it may be dark or black, indicating putridity. The urine may be passed too copiously or scantily, with pain, with effort, or it may be retained with difficulty. There may be a frequent or uncontrollable desire to micturate, with burning or scalding pain; or the pain may be only experienced in passing the last few drops.

When urine has to be examined, a little should be taken from the whole quantity that has been passed during twenty-four hours, as it varies greatly in its properties at different periods of the day.

The *specific gravity* of urine in Bright's disease, is 1,015 to 1,004; diabetic urine, 1,025 to 1,040.

CHAPTER III.

THE MEDICINES, ETC.

The following short description of the different forms of Homœopathic medicine used in the practice, is given for the sake of the uninitiated. The preparations are of four kinds, viz., *Tinctures*, *Pilules*, *Globules*, and *Triturations*.

TINCTURES.—These contain the more active principles of the vegetable medicines, in a greater or less concentrated form, and are generally supposed to be quicker and more decided in their action, in acute diseases, than either pilules or globules. It is therefore advisable for those who reside at a distance from medical aid, to be furnished with such a selection of the tinctures as are adapted to sudden and acute diseases, in addition to a complete case of the pilules or globules. The selection recommended by the author, may be found page 47.

PILULES.—These are made of a porous, non-medicinal substance, and afterwards carefully saturated with the tinctures. They are very tangible; do not evaporate like tinctures, and retain their virtue for many years if unexposed. They are probably the *best* form of medicine for domestic use.

GLOBULES.—In size, globules may be compared to poppy seeds: they are, therefore, very portable, and, on this account, are recommended to the missionary, emigrant, etc. They are prepared in the same manner as the pilules, but being so small, are less appreciable to the touch.

TRITURATIONS.—These are in the form of powder, containing a portion of the original drug, triturated with a given quantity of sugar of milk, and are necessary to the administration of the lower attenuations of insoluble medicines, such as *Calcarea*, *Carbo Vegetabilis*, *Hepar Sulphuris*, *Mercurius*, *Sepia*, *Silicea*, etc.

LIST

OF THE

PRINCIPAL MEDICINES PRESCRIBED IN THIS MANUAL,

*With their Latin and English Names, their Abbreviations, and the Potency recommended for general domestic use.**

| Latin. | English. | Abbrev. | Dil. |
|---------------------------------|---------------------|-------------------|------|
| 1. Aconitum Napellus | Monk's Hood | <i>Acon.</i> | 3 |
| 2. Antimonium Crudum | Crude Antimony | <i>Ant. Cr.</i> | 6 |
| 3. Antimonium Tartaricum | Tartar Emetic | <i>Ant. Tart.</i> | 6 |
| 4. Arnica Montana | Leopard's Bane | <i>Ara.</i> | 3 |
| 5. Arsenicum Album | White Arsenic | <i>Ars.</i> | 3 |
| 6. Aurum Metallicum | Metallic Gold | <i>Aur.</i> | 6 |
| 7. Belladonna | Deadly Nightshade | <i>Bell.</i> | 3 |
| 8. Bryonia Alba | White Bryony | <i>Bry.</i> | 3 |
| 9. Calcareæ Carbonica | Carbonate of Lime | <i>Calc. C.</i> | 6 |
| 10. Cannabis Sativa | Hemp | <i>Cann. S.</i> | 1 |
| 11. Cantharis | Spanish-fly | <i>Canth.</i> | 3 |
| 12. Carbo Vegetabilis | Vegetable Charcoal | <i>Carbo V.</i> | 6 |
| 13. Chamomilla Vulgaris | Wild Chamomile | <i>Cham.</i> | 3 |
| 14. China | Peruvian Bark | <i>Chin.</i> | 1 |
| 15. Cina | Worm-seed | <i>Cin.</i> | 3 |
| 16. Cocculus Indicus | Indian Berries | <i>Cocc.</i> | 3 |
| 17. Coffea | Coffee | <i>Coff.</i> | 3 |
| 18. Colocynthis | Bitter Cucumber | <i>Coloc.</i> | 3 |
| 19. Cuprum Metallicum | Metallic Copper | <i>Cup.</i> | 6 |
| 20. Digitalis | Foxglove | <i>Dig.</i> | 3 |
| 21. Drosera Rotundifolia | Round-leaved Sundew | <i>Dros.</i> | 3 |
| 22. Dulcamara | Bitter Sweet | <i>Dulc.</i> | 3 |
| 23. Ferrum Metallicum | Metallic Iron | <i>Ferr.</i> | 3 |
| 24. Graphites | Black Lead | <i>Graph.</i> | 6 |
| 25. Helleborus Niger | Black Hellebore | <i>Hell.</i> | 3 |
| 26. Hepar Sulphuris | Sulphuret of Lime | <i>Hep. S.</i> | 6 |
| 27. Hyoscyamus Niger | Black Henbane | <i>Hyoa.</i> | 3 |
| 28. Ignatia Amara | St. Ignatius' Bean | <i>Ign.</i> | 3 |
| 29. Iodium | Iodine | <i>Iod.</i> | 3 |
| 30. Ipecacuanha | Ipecacuanha | <i>Ipec.</i> | 3 |

* For information respecting the properties and uses of the medicines in this list, their antidotes, etc., consult the *Materia Medica* at the end of the volume.

LIST OF THE MEDICINES.

47

| Latin. | English. | Abbrev. | Dil. |
|---------------------------------|--------------------------|------------------|------|
| 31. <i>Lycopodium Clavatum</i> | Wolf's Foot | <i>Lyc.</i> | 3 |
| 32. <i>Mercurius Corrosivus</i> | Bichloride of Mercury | <i>Merc. C.</i> | 3 |
| 33. <i>Mercurius Vivus</i> | Quicksilver | <i>Merc. V.</i> | 6 |
| 34. <i>Nitri Acidum</i> | Nitric Acid | <i>Nit. Ac.</i> | 3 |
| 35. <i>Nux Vomica</i> | Strychnos Nux Vomica | <i>Nux V.</i> | 3 |
| 36. <i>Opium</i> | White Poppy | <i>Op.</i> | 3 |
| 37. <i>Phosphorus</i> | Phosphorus | <i>Phos.</i> | 3 |
| 38. <i>Phosphori Acidum</i> | Phosphoric Acid | <i>Phos. Ac.</i> | 3 |
| 39. <i>Platinum</i> | Platina | <i>Plat.</i> | 6 |
| 40. <i>Plumbum Metallicum</i> | Metallic Lead | <i>Plumb.</i> | 6 |
| 41. <i>Pulsatilla</i> | Pasque Flower | <i>Puls.</i> | 3 |
| 42. <i>Rhus Toxicodendron</i> | Poison Oak | <i>Rhus.</i> | 3 |
| 43. <i>Sepia Stuccus</i> | Inky juice of Cuttlefish | <i>Sep.</i> | 6 |
| 44. <i>Silicea</i> | Silex | <i>Sil.</i> | 6 |
| 45. <i>Spigelia</i> | Indian Pink | <i>Spig.</i> | 3 |
| 46. <i>Spongia Tosta</i> | Roasted Sponge | <i>Spong.</i> | 3 |
| 47. <i>Staphysagria</i> | Stavesacre | <i>Staph.</i> | 3 |
| 48. <i>Stramonium</i> | Thorn Apple | <i>Stram.</i> | 3 |
| 49. <i>Sulphur</i> | Sublimed Sulphur | <i>Sulph.</i> | 3 |
| 50. <i>Veratrum Album</i> | White Hellebore | <i>Verat.</i> | 3 |

Also the strong Tincture of CAMPHOR, which must be kept by itself, or the pilules; the latter may be kept, well corked, with the tinctures for external use.

In addition to the fifty remedies in the above list, a few others, at present less frequently employed, are occasionally prescribed. A brief description of the uses of such addenda may be found immediately following the Materia Medica, at the end of the volume.

Besides the Medicines in Pilules or Globules, the following twelve tinctures for internal use, in acute cases, should be added, namely:—Nos. 1, 5, 7, 8, 13, 14, 30, 35, 37, 41, 42, and 50.

MATRIX TINCTURES, FOR EXTERNAL USE.

| | | | |
|-------------------|---|-----------------------|---|
| ACONITUM NAPELLUS | φ | CALENDULA OFFICINALIS | φ |
| ARNICA MONTANA | φ | RHUS TOXICODENDRON | φ |

These are recommended to be kept, with the tinctures for internal use, Arnica plaster, strapping plaster, scissors, oiled silk, etc., in a compartment beneath, and separate from the medicines in the body of the chest.

DIRECTIONS FOR TAKING THE MEDICINES—*Tinctures* should be dropped into the bottom of a glass, and water, in the proportion of one tablespoonful to a drop, poured upon the medicine. It is desirable to drop the tinctures accurately; and to this end the bottle should be held in an oblique manner, with the lip resting against the cork; the bottle should then be carefully tilted (as shown in the accompanying drawing), when the tincture will drop from the lower edge of



the cork. A little practice will enable a person to drop one or any number of drops with great exactness. The vessel in which the mixture is made should be scrupulously clean, covered over, and the spoon not left *in* the medicine.* If it has to be kept several days, a *new* bottle and cork may be used.

Pilules or *Globules* may be taken dry on the tongue; but it is always better, if convenient, to dissolve them in pure soft water.

The *Triturations* should be placed dry on the tongue, and gradually swallowed, the mouth having first been rinsed with water.

* Glazed spoons, and graduated fine earthenware medicine cups, with covers, numbered 1 and 2, specially made for this purpose, and sold by Homœopathic chemists, are the most suitable. These vessels are recommended, as they protect the medicines from light and dust, and distinguish them from other liquids. Mixtures prepared in glasses or other domestic vessels are often thrown away in mistake, sometimes causing great inconvenience.

The most appropriate times for taking the medicines, as a rule, are, on rising in the morning, at bed-time, and if oftener prescribed, about an hour before, or two or three hours after, a meal. Under no circumstances should a patient be aroused from sleep to take medicine.

THE DOSE.—In determining the quantity and strength of doses, several circumstances must be taken into consideration, such as age, sex, habits, the nature of disease, etc. As a general rule, without reference to individual idiosyncrasies, the following may be stated as the proper dose in domestic practice :—

FOR AN ADULT, one drop of the tincture, one or two pilules, four globules, or one grain of the trituration.

FOR A CHILD, about one half the quantity.

FOR AN INFANT, one third.

One drop, or a pilule, is easily divided into two doses by mixing it with two spoonful of water, and giving one spoonful for a dose.

REPETITION OF DOSES.—The repetition of the dose must be determined by the character of the malady from which the patient is suffering, the urgency and danger of the symptoms, and the effects produced by the medicines. In violent and dangerous diseases, such as cholera, croup, diphtheria, pleuritis, convulsions, etc., the remedies may be repeated every ten, fifteen, or twenty minutes ; in less urgent cases, every two, three, or four hours. In chronic maladies, every six, twelve, or twenty-four hours. When improvement takes place, the medicines should be administered less frequently, and gradually relinquished.

ALTERNATION OF MEDICINES.—To avoid the confusion resulting from mixing different remedies in one prescription, and to ascertain the pure action of each separate drug, homœopaths never mix several medicines together in one potion ; but in acute diseases, when the symptoms of the

malady are not covered by a single remedy, and a second one is indicated, the two may be given in *alternation*; that is, one medicine may be followed by another at certain intervals of time, and in a regular order of succession.

The alternation of drugs is sometimes necessary in acute diseases; in croup, for example, *Acon.* and *Hepar.*, or *Iod.* and *Brom.*; in pneumonia, *Acon.* and *Bry.*; in typhus, *Bry.* and *Rhus*, etc. The different stages of such diseases can rarely be accurately defined, one stage merging into another, requiring the alternate use of remedies, so as to form a kind of natural transition in the regular progress of the disease. In chronic diseases, the alternation of medicines is seldom necessary.

DRUGS.—While on the subject of medicines, we would strongly dissuade from the practice of taking pills, herb teas, senna, salts, castor oil, etc. *Aperient drugs* especially, which are advertised and sold so freely as “patent” medicines, should be avoided, as they inflict an incalculable amount of injury, by over-stimulation, weakening the digestive organs, producing indigestion, costiveness, piles, and a gradual decline of the general health and strength; until at length, the patient falls a victim to some acute disease, or dies from a chronic affection of the parts on which the chief force of the drugs was expended.

MEDICINE CHEST.—A case or chest to suit this manual, should contain the medicines mentioned in the following list, should be constructed expressly, and used for no other purposes; it should also be protected from light and heat, and kept apart from substances which emit a strong odour. Immediately after using a phial it should be corked again, and the corks and phials never changed from one medicine to another.

CORKS.—If a cork decays, breaks, or is otherwise damaged, a new one should be at once substituted. Except for strong

acids, good sound corks are preferable to glass stoppers, as they more effectually prevent evaporation, preserve the virtue of the medicine, and are easily replaced when broken. Missionaries, emigrants, etc., should take an extra supply.

If the above directions are observed, the medicines may be kept unimpaired for years.

PART II.

MEDICAL AND SURGICAL DISEASES AND THEIR HOMŒOPATHIC TREATMENT.

CHAPTER I.

FEVERS.

FEVER (from *Ferves*, to burn,) has been thus defined:—After a preliminary stage of languor, weakness, loss of appetite, and some degree of shivering or chilliness, there succeeds preternatural heat of body, increased waste of tissue, quickened pulse, muscular debility, and general functional disturbance. This morbid state accompanies many diseases as one of their phenomena—*symptomatic* fever; but under certain circumstances we meet with *idiopathic* or *essential* fevers, which are quite independent of any local inflammation. In this chapter, we shall consider the following varieties:—1. Simple Fever; 2. Inflammatory Fever; 3. Typhoid Fever; 4. Typhus; 5. Intermittent Fever; 6. Hectic Fever; 7. Hay Fever.

1.—Simple Fever (*Febricula*).

This is the mildest form in which fever occurs; and, as it usually disappears in from eight to thirty-six hours, it is called an ephemerical disease. This condition, however, may

be the precursor of very serious disorders, and requires prompt attention.

SYMPTOMS.—It usually commences in the afternoon or evening by slight shiverings, lassitude and weariness, succeeded by heat, thirst, general uneasiness, quickened pulse, headache, and disturbed sleep. It generally terminates in gentle perspiration.

CAUSES.—Excessive exertion, exposure to sudden changes of temperature or a hot sun, derangement of the digestive organs, or mental excitement.

TREATMENT.—*Aconitum*.—When the skin is hot and dry, and whether or not the symptoms can be traced to any particular cause. A dose every two hours, until the skin becomes moist, and the pulse less frequent. Should the attack be one of *simple* fever merely, this remedy will be rapidly effectual: if it be the precursor of eruptive diseases or of some severe disorder, it is still the best remedy at this stage, and will materially modify its violence.

Aconitum has been appropriately termed the *Homœopathic lancet*; for in febrile attacks, whether slight or serious, it is the first remedy to be administered.

ACCESSORY MEASURES.—The patient should be kept cool and quiet, no stimulating food or drink taken, and all causes likely to occasion mental or bodily excitement carefully avoided.

2.—Inflammatory Fever.

This is a more severe form of fever than the one just noticed, continues much longer, and may be regarded as a modification of one of the two varieties next described.

SYMPTOMS.—Inflammatory fever is preceded by rigors, or alternate chills and flushes, followed by burning heat and dryness of the skin; hard, full, quick pulse; dryness of the tongue, mouth, and lips; white coating, or bright redness,

of the tongue; great thirst; highly-coloured and scanty urine; and constipation. To these may be added—pains in the loins, headache, loss of appetite, hurried breathing, delirium, etc. These symptoms usually continue for a few days, with an aggravation of them at night. Profuse perspiration, bleeding of the nose, or diarrhoea, eventually follow, and the fever gradually declines, leaving the patient weak, but otherwise well.

DANGERS.—This disease may degenerate into typhoid or other severe and fatal forms of fever, or it may attack some vital organ. If the treatment is relinquished too early, or proper care is not exercised during recovery, relapses are apt to occur, and prove troublesome and even dangerous.

CAUSES.—Suppressed perspiration, exposure to damp or cold, dwelling in damp houses, sudden changes of temperature, wearing damp linen, poor or insufficient diet; injuries; circumstances which cause shock to the nervous system, or debility.

TREATMENT.—*Aconitum* is found to be the principal remedy for all such symptoms as those above indicated; and it will most effectually calm the arterial excitement. A dose every two or three hours, or, in urgent cases, every half-hour or hour. A profuse *perspiration* following the administration of *Aconitum* may be taken as an indication of its beneficial action, and should be then discontinued.

Belladonna will be required, if, after repeated doses of *Aconitum*, there should be violent head-ache, redness and congestion of the face; a wild and fiery appearance of the eyes; throbbing and distension of the blood-vessels in the temples: wakefulness, or furious nocturnal delirium, and other well-marked cerebral symptoms. It may be frequently advantageously alternated with *Aconitum*. A dose every one to four hours.

Bryonia.—When, in addition to the ordinary symptoms

of inflammatory fever, there is a *heavy, stupifying headache*, aggravated by movement, and a sensation as if the head would burst; when the disease appears to be concentrated in the chest, with cough, oppressed and laboured breathing, *stitching pains in the side*, aggravated by movement and breathing; or when there is a *bilious complication*, with oppression at the pit of the stomach, yellow-coated tongue, nausea, constipation, shooting pains in the limbs, brown or bright yellow urine, and extreme irritability.

Antimonium Crud.—When gastric irritation is present, nausea, inclination to vomit, eructations, flatulence, etc., this will be found an excellent remedy.

Opium.—Great stupor; slow, stertorous breathing; a hard, full, slow or oppressed pulse; low delirium; deafness, or blindness.

Arsenicum.—Great *debility*, prostration, and rapid sinking, with very small, thready pulse; *burning thirst*; diarrhoea, with dark offensive discharges; cold perspirations, the symptoms being aggravated at night.

Rhux Tox.—Extreme weakness and prostration; low muttering delirium; picking at the bed-clothes; offensive, putrid, or bloody diarrhoea; dry, cracked tongue; great thirst, and scanty urine.

ADDITIONAL MEDICINES SOMETIMES REQUIRED.—*Mer.*, *China*, *Canth.*, *Nux Vom.*, *Puls.*, *Nit. Acid.*, *Verat.*, or *Sulph.*

ACCESSORY MEASURES.—The patient should be placed in a spacious, well-ventilated room, and protected from everything that is likely to cause excitement or prevent sleep, such as too much noise, company, heat, or too many or thick bed-coverings. In the preliminary stage, the use of the *hot foot-bath*, as recommended in the section on “Cold in the Head,” or the *Wet Pack* described page 33, will often immediately restore the equilibrium of the system; or at least, greatly facilitate the cure. The linen should be

changed often, and all matters discharged from the body at once removed. The patient should be also sponged over at suitable intervals with tepid or cold water, as may be most agreeable. The application of water in this manner will prove a valuable adjunct to the medicinal treatment prescribed, and will accelerate those favourable changes which are now hoped for. As the fever rises, the patient loses all appetite for food, nature thus indicating that none is now required. As a beverage, water is the principal, and should be given in small draughts, frequently repeated. In acute fever, cold water is like the "Balm of Gilead." The patient may also take Gum-water,* sweetened with a little sugar, or barley water,* both of which are somewhat nutritive, often very grateful, and less stimulating than other forms of nourishment. Ripe grapes, roasted apples, etc., may also be allowed in moderation; and, after the urgent symptoms have abated, first arrowroot, then chicken broth, with a few crumbs of stale bread; as the appetite returns, beef-tea; and, finally, such articles of food and drink may be allowed, as will *partially* appease the appetite; for if the still weak and often irritable stomach is overloaded, a dangerous relapse may occur.

The treatment here recommended must of course be modified as circumstances require, our aim being to suggest such *general* directions as are often appropriate in inflammatory diseases.

If the fever occurs in debilitated persons, is protracted or attended with great and rapid prostration, beef-tea, or the essence of beef,* brandy and water, or brandy and egg mixture, should be early administered in small quantities, at regular and frequent intervals. For full directions, see "Hints on Nursing Fever Patients," in the next section.

* For directions to prepare, refer to Index.

3.—Typhoid Fever (*Febris Typhoides*).

COMMON CONTINUED FEVER is divided into four forms, as follows:—(1) *Typhoid Fever*, sometimes described as Enteric, Intestinal, or Gastric Fever, Typhia, etc.; (2) *Typhus Fever*, often called Brain, Hospital, Camp, or Ship Fever; (3) *Relapsing Fever*, a variety of rare occurrence, followed by a prolonged convalescence, in which the pulse is remarkably low; and (4) *Febricula*, a simple variety of fever, not due to any specific poison, or a modification of one of the other varieties. This form has been previously described.

The first-named form, typhoid or enteric fever, we have considered with more than usual detail, having watched and treated a very large number of cases during a severe epidemic of this disease in 1864, a year remarkable as one of the *driest* upon record, only 15·7 inches of rain having fallen.

DEFINITION.—TYPHOID FEVER is a *continued fever*, lasting about twenty-three days, often longer, with an eruption on the chest, abdomen, or back, and attended with great *feebleness*, abdominal pains or tenderness, and diarrhoea, which increases with the disease, the discharges being copious, liquid, of a light-ochre colour, putrid, and often containing altered blood.

Although having many symptoms in common with typhus, it is an essentially different fever, and there are several considerations which render it important to be able early to identify the variety we may be called upon to treat. Thus, the *causes* of these fevers are different, and suggest sanitary regulations of an opposite nature; typhoid is less contagious than typhus; the tendency to a fatal issue varying, the treatment must be regulated accordingly; and, further, if not early recognised, patients may persist in their usual

occupations at a time when rest in bed would conserve the strength and moderate the progress of the disease. To render the recognition of these fevers easy, we subjoin the following table, page 59.

SYMPTOMS.—These may be arranged into the *accession* and the three *weekly periods*.

Unless the poison is very concentrated, there is a period of *incubation*, varying from ten to fourteen days, after which the disease sets in slowly and insidiously. The patient becomes languid and indisposed to exertion; is chilly and unwilling to leave the fire; the back aches, and the legs tremble; the appetite fails, and there are even nausea and sickness; the tongue is white, the breath offensive, and often the throat is sore; the bowels are deranged, sometimes confined, but oftener relaxed; the pulse is quickened and the sleep disturbed. These symptoms gradually increase, until at length the patient has a violent rigor, succeeded by heightened temperature, severe headache, and such muscular debility that he takes to his bed. This is the *accession*. The course of the fever is now set in, and may be divided into three weekly periods (*Watson*) from the accession.

1ST WEEK.—The prominent symptoms are, vascular excitement and nervous oppression, including a bounding pulse (90), great heat of skin, thirst, and obscured mental faculties; the patient cannot give a coherent account of himself, complains of little except his head, and is usually delirious at night. The abdomen enlarges, is resonant on percussion, and there is tenderness or even pain on firm pressure, especially in the right *iliac fossa*, near the termination of the small intestine; a peculiar *gurgling* sensation is imparted to the fingers when pressing there from the mixing of the gastric fluids.

TABLE OF THE CHIEF DIFFERENCES BETWEEN TYPHOID AND TYPHUS FEVER.

TYPHOID.

1. *Typhoid* arises from *bad drainage*, foul drinking-water, as from a drain leaking into a well, decomposing animal matter, etc., combined with *high temperature*, deficient rainfall, certain electrical conditions, or an insufficient supply of ozone.
2. Seldom attacks persons after forty, and is most common in *youth*, including childhood.
3. Is more common among the *rich than the poor*.
4. Commences *slowly* and insidiously, the premonitory stage lasting a week or more.
5. The eruption of the skin consists of *ROSE-COLOURED* spots, something like measles, appears upon the chest, abdomen, and back, comes in successive crops, and fades under pressure.
6. *Diarrhoea*, with light, ochre-coloured, watery stools, is very common, with congestion of the mucous membrane of the intestine, sometimes hæmorrhage, or even ulceration.
7. The expression is *bright*, the hectic blush is limited to the cheeks, and the pupils are dilated.
8. Continues at least *three weeks*, and often five or six, or even more.
9. *Relapses*, marked by a return of all the former symptoms, frequently occur, especially in certain epidemics.
10. The tendency to death is by *Asæmia* (exhaustion).

TYPHUS.

1. *Typhus* arises from *overcrowding*, with *defective ventilation*, and spreads by contagion.
2. Occurs at any age, but most frequently in *middle life*.
3. Is rare among the wealthy classes, excepting doctors, students, and *visiting* clergymen.
4. Comes on *quickly*.
5. The eruption is of a *MULBERRY COLOUR*, comes out only once (between the fourth and seventh days), lasts until the termination of the disease, and does not disappear under pressure.
6. The *brain* is chiefly affected, and the bowels are but little so.
7. There is a *dusky blush* on the face, neck, and shoulders, injected eyes, and contracted pupils.
8. Runs its course in about a *fortnight*.
9. Relapses are of *rare* occurrence.
10. The tendency to death is by *Coma* (morbid drowsiness).

2ND WEEK.—Debility and emaciation become very marked, the muscles wasting as well as the fat; the urine becomes scanty and heavy, being loaded with urea from wasting of the nitrogenized tissues. At this time, from the seventh to the fourteenth day, the characteristic *eruption* generally begins to show itself, chiefly on the sternum and epigastrium, in the form of rose-coloured dots. These papulæ or pimples are few in number, round but slightly elevated, and insensibly fade into the natural hue of the surrounding skin. The quantity of the rash bears no proportion to the severity of the disease. “This successive daily eruption of a few small, very slightly-elevated, rose-coloured spots, disappearing on pressure, each spot continuing visible for three or four days only, is peculiar to and absolutely diagnostic of typhoid fever” (*Aitken*). Although, however, the rose-coloured rash is never met with in any other disease, yet we have treated cases of true typhoid without being able to detect a solitary spot. Occasionally, also, *sudamina* appear, which are very minute vesicles, looking like drops of sweat, chiefly on the neck, chest, or abdomen. During the second week there is almost always *diarrhœa*, which generally increases towards the end of the week, and consists of semi-fluid, pale-yellow, frothy motions, of which there may be five, six, or even more in twenty-four hours. The *specific characters* of the evacuations in enteric fever are the following:—*fluidity*; *pale-ochre or drab-colour*; *sickly, putrid odour*; *absence of bile*; and *a flocculent debris* of disintegrated agminated glands of the ileum. The flocculent debris may be discovered by washing the discharges. In reference to the *colour* of the stools, it is worth notice that often before a patient takes to his bed, or looseness of the bowels sets in, the fæces are of a light-ochre colour, and furnish the most marked early sign of enteric fever.

3RD WEEK.—The debility and emaciation become extreme; the patient lies extended on his back, sinking towards the foot of the bed without making an effort to change or preserve his position. There is a bright and pinkish flush of the cheeks, which strongly contrasts with the surrounding pale skin; *sordes* occur on the mucous membrane of the mouth and lips; the tongue is dry and brown, or red and glazed, and often rough and stiff, like old leather; the urine is frequently retained from inaction of the bladder; the *fæces* pass without control, the tendons start from irregular, feeble contractions of the muscles; the patient picks vacantly at the bedclothes, in an attempt to pull black spots, like flies on the wing (*muscæ volitantes*), which appear before the eyes, or attempts to grasp at or catch in the air; becomes deaf, and no longer knows his friends, and on recovery will have no remembrance of anything that has at this time occurred.

TEMPERATURE.—The information afforded by the application of the thermometer to the body in the diagnosis of enteric fever is very important. In all the acute specific fevers the temperature is abnormally raised, but in typhoid the elevation is *gradual*, while in most others it is *abrupt*. During the first three or four days, except a light-ochre colour of the *fæces*, we have no symptoms to indicate the *invasion* of so serious a disease except a *gradual* elevation of the temperature; but if, on the fourth or fifth day, the maximum temperature attained during the twenty-four hours be not 105° , the disease is most probably not typhoid fever. And, further, if on the first or second day the maximum temperature reaches 104° , the disease is some other acute fever, as the temperature only *gradually* attains such a degree in typhoid fever. At the commencement the diagnosis is difficult, inasmuch as the characteristic rash does not usually appear before the sixth, sometimes not till the twelfth, day of the disease; and, indeed, in children,

cannot sometimes be observed at any stage of the disease. Temperature is also an important element in the *prognosis*. Thus we have great *variations* in the temperature in typhoid fever, being low in the morning, and attains its maximum degree in the evening. The greater these fluctuations at the end of the second week, the more favourable is the attack, and the shorter will be its duration. If the temperature falls considerably in the morning, even though the evening rise is considerable, the prognosis is favourable. On the other hand, should the temperature during the second week remain continuously high, we may predicate a severe and prolonged attack. Again, the first probable indication in cases of persistent elevation of the temperature, is a decline in the morning temperature. When such a decline occurs, especially if it be repeated on subsequent days, even though the maximum temperature reached in the evening remain the same, we may be certain that the fever has begun to abate. It is true, a sudden fall in the temperature may be consequent on diarrhœa or hæmorrhage—probably the latter if it occurs very suddenly; but, usually, other symptoms would indicate such an occurrence.

DANGERS.—(1) *Hæmorrhage*.—This may occur from the ulcerated patches in the *ileum*, during the separation of the gland sloughs, and may be either capillary or from the opening of a large vessel. The discharge of blood may be so great as to be immediately fatal by syncope, or it may be remotely fatal, by exhausting the patient so that he has no power to bear up against the fever in its subsequent course. Sometimes without any escape of blood from the orifice of the bowel, the patient becomes suddenly blanched and dies of syncope. In such a case, a *post mortem* examination finds the intestines distended with red, clotted blood. (2) *Exhaustion* from *profuse and persistent diarrhœa*, in cases in which the catarrhal affection of the mucous membrane has

been very severe and obstinate. The evacuations weaken the patient rapidly, and hasten the fatal termination.

(3) *Perforation*.—The ulceration may extend till the coats of the bowel are perforated and cause fatal peritonitis; but this is not so likely to happen till an advanced stage of the disease—about the fourth or fifth week—or just as convalescence seemed to be setting in. The symptoms of this occurrence are, a sudden pain and tenderness in the abdomen, with swelling, altered expression of the features, more or less nausea and vomiting, and death in one or two days.

(4) *Congestion*.—The lungs may become congested, giving rise to bronchitis, pleurisy with effusion, pneumonia, or latent tubercle may be called into fatal activity; in short, there is a tendency, from the poisoned state of the blood, to congestion in the three great visceral cavities of the body—the head, the chest, and the abdomen. No disease presents, in the mode of its accession, in the course, gravity, and termination of the symptoms, so many varieties, complications, and accidents as typhoid fever, so that it has been considered almost as an *epitome of the whole practice of medicine*.

MORTALITY.—The reports of the Registrar-General show that in this country alone about 20,000 persons die annually of typhoid fever, and that probably 150,000 persons are laid prostrate by it. It proved fatal to the Prince Consort on the 14th of December, 1861, twenty-one days from the commencement of the attack. Several members of the royal family of Portugal also came to their untimely end by it; and Count Cavour, but the death of the latter was accelerated by venesection.

CAUSE.—According to Drs. Budd, Aitken, and others, the poison of typhoid fever does not originate in decomposing sewage, and is only transmitted by it, the specific poison being contained and transmitted by the discharges from the bowels of the person infected with the fever. The contagious

matter may convey the fever, in two principal ways:—(1) By percolating the soil into the wells which furnish drinking water; (2) By infecting the air through defective sewers or water-closets. In opposition to this hypothesis, Dr. Murchinson makes the following objections:—“(1) There are many facts which show that enteric fever often arises from bad drainage, independent of any transmission from the sick. The danger ensues when the drain becomes choked up, when the sewage stagnates and ferments, and when the transmission of a poison from any distant locality is impeded, if not completely arrested. (2) There are numerous instances of enteric fever appearing in houses having no communication by drain with any other dwelling. (3) There is no evidence that the stools of enteric fever are of such a virulent nature as has been stated. The attendants on the sick are rarely attacked. (4) The fact that the prevalence of the disease is influenced by temperature is opposed to the idea that it depends on a specific poison derived from the sick; but is readily accounted for on the supposition that the poison is generated by fermentation or decomposition.”

We conclude, therefore, *that refuse animal and vegetable matters, if permitted to accumulate and decompose in seasons of drought generate a poison, which if not washed away or diluted by sufficient rain, rises into the air, or becomes diffused in the water; and which, when introduced into the body by these media, may produce enteric fever* (HARLEY). Hence we find it most prevalent in Autumn, and at the commencement of winter, after a long season of heat and drought. **THE BEST PROPHYLAXIS, THEREFORE, ARE, AN ABUNDANT SUPPLY OF PURE WATER; SUFFICIENTLY INCLINED AND WELL-CONSTRUCTED SEWERS, WITH IMPERMEABLE WALLS; A WELL-DRAINED SOIL, AND REGULARLY FLUSHING THE DRAINS DURING DRY WEATHER COPIOUSLY WITH WATER. IF THESE MEASURES ARE EFFICIENTLY CARRIED OUT, TYPHOID OR ENTERIC FEVER MAY BE EXPECTED ENTIRELY TO DISAPPEAR.**

TREATMENT.—A medical man should conduct the treatment; for just as no two human faces are precisely alike, so no two cases of *typhoid* or *typhus* fever ever present, from the commencement to the close, exactly the same symptoms. The following classification of symptoms will, it is hoped, aid the selection of the remedy.

Inflammatory symptoms.—Acon. and Bry.

Great prostration.—Ars., Mur. Acid, Verat., or Rhus.

If the lungs are most involved.—Phos. or Bry.

If the brain.—Bell., Hyos., Camph., Opi., Agaricus Mus., Stram., or Rhus.

If the bowels.—Bry., Ipec., Ars., Merc., Nux Vom., or Puls.

Typhoid with putridity.—Carbo Veg., Ars., Rhus., and Verat.

Hæmorrhage from the bowels.—Cup. Sulph., Nit. Acid, or Ipec.

Nervous debility following fever.—China, Fer. Sulph., or Ign.

The symptoms indicating some of these medicines are described under "Inflammatory Fever," page 53-4. We shall only add the following distinctive features.

Aconitum.—A dose every two or three hours when *inflammatory* symptoms predominate.

Bryonia.—Bitter taste, *brown-coated*, rough tongue, nausea, *confined bowels*, stupifying headache, cough, with *stitches in the chest*, and irritability. During the *inflammatory stage*, *Bry.* and *Acon.* in alternation; in low forms of the disease, *Bry.* and *Rhus.*

Belladonna.—Redness of the face; bright, shining eyes, and dilated pupils; distension of the veins, and throbbing of the arteries of the head; startings during sleep, or continued wakefulness.

Hyoscyamus.—Constant and furious delirium; sudden

starts and outcries; twitching; great nervous excitability. This remedy has similar indications to *Belladonna*, and often succeeds when that fails.

Arsenicum.—Extreme *prostration*; insatiable *burning* thirst; diarrhoea; *feeble*, intermittent, almost imperceptible pulse. If to these symptoms are added *foetid evacuations*, cold perspirations, rattling respiration, *Carbo V.* should be administered in alternation; a dose every three or four hours. *Arsenicum* is a remedy of priceless value in enteric fever, and it should be administered somewhat early, as it tends to prevent extreme prostration.

Baptisia Tinctoria.—This remedy is useful in all stages of typhoid fever. In large doses, long continued, it is said to effect changes in the blood similar to those in typhoid, and a condition of the fluids of the body generally resembling that which occurs in low fevers.

Hydrochloric Acid (A) in two-drop doses, every three hours, has, in my hands, been highly successful in the treatment of typhoid fever, particularly when the pulse has been very slow and weak, the tongue morbidly clean, with great nervous depression, and when the patient has complained of a constant sour taste in the mouth; but, in proportion as the tongue has been coated dry or brown, and the pulse has been accelerated, so have I found the efficacy of *hydrochloric acid* weakened (DR. SIMMONS).

Muriatic Acid.—Constant stupor, the patient *sinks down in the bed*, moans during sleep, and mutters when awake; there is a paralytic condition of the tongue, and dryness of the mouth and throat. These symptoms will be best met by giving *Mur. Acid* in alternation with *Opium*, a dose every three or four hours.

Mercurius.—Copious debilitating *perspirations*; diarrhoetic evacuations, greenish or yellowish; thickly-coated tongue; tenderness at the pit of the stomach.

Carbo Veg.—Offensive smells from the patient; putrid, involuntary evacuations; deep-red urine; pinched and sunken countenance; burning in the abdomen and at the pit of the stomach; cold extremities; rapidly sinking powers, and scarcely perceptible pulse.

Nitric Acid.—Hæmorrhage from the bowels, or discharges of a greenish, slimy mucus, with extreme tenderness of the abdomen; scalding urine; sore mouth; foetid perspiration; and tendency to collapse. A dose every four hours.

China.—When the tongue becomes clean and moist, the pulse soft, and all feverish excitement has disappeared, this remedy may be administered with the best effects.

ACCESSORY MEASURES.—The points that require special attention in the management of fever patients are referred to in the following “hints.”

HINTS ON NURSING FEVER PATIENTS.—The unremitting attention of an experienced, *trained* nurse is a part of the treatment quite as essential as the administration of medicine. To aid to some extent in the performance of this duty, the following *general* suggestions are offered. The medical attendant alone can furnish directions adapted to *special* cases. Under such circumstances it is the nurse's duty faithfully to carry out his directions, and to report to him at each visit the symptoms and progress of the patient, and the effects of the treatment.

1st. *The Sick Room.*—The following points should be studied: (1) It should be *airy*. If practicable, the patient should be placed in a spacious, well-ventilated apartment, which allows an uninterrupted admission of fresh, and the free escape of tainted, air. Fresh air can only be ensured by an open window or door, or both. It is generally desirable to have a blazing fire kept burning night and day, both in summer and winter, as this assists the efficient ventilation of the room; but the patient's head should be protected from

its direct effects. The poison of the disease being thus diluted with atmospheric air loses its power and so becomes inoperative. The room should be divested of all superfluous furniture—carpets, bed-hangings, etc. (2) It should be *darkened*; not by excluding all light and air, by closed shutters, or closely-drawn bed-curtain, but by letting down the window-blinds and securing a *subdued light*, and by protecting the patient's face from any glare, as from gas or candles. (3) The sick room should be *quiet*. Silk dresses and creaky boots should not be worn; the crackling noise made by anyone reading a newspaper is often most distressing to invalids; the tones of the voice should be gentle and subdued, but whispering avoided; all unnecessary conversation must be forbidden, and noise shut out. (4) The *temperature* of the room should be regulated by a *thermometer*, and maintained at an even temperature, not exceeding 55° Fabr. The sensations of the nurse cannot be depended upon as a sufficient guide; but the thermometer, suspended out of a current of air and the direct influence of the fire, will indicate the proper temperature at which the room should be kept.

2nd. *Rest*.—The patient should be disturbed as little as possible, and enjoy the most complete rest during the whole course of the disease. The importance of this is proved by *post-mortem* examinations, which often show vigorous attempts on the part of neighbouring structures to limit, by union and adhesion, the results of perforation, obviously indicating, in practice, the necessity of absolute rest throughout the disease (AITKEN). Any efforts made when the ulcers in the ileum were cicatrizing would affect the system unfavourably, and re-excite that morbid action which might end in perforation of the bowel.

3rd. *Cleanliness*.—The personal and bed linen should be *frequently changed*, and all matters discharged from the

body immediately removed. The mouth should be frequently wiped out with a soft wet towel, to remove the *sordes* which gather there in severe forms of fever. The patient's body should be sponged over as completely as possible at suitable intervals with tepid or cold water, as may be most agreeable to the feelings, and quickly dried with a soft towel. Sponging the whole surface of the body with cold or tepid water should never be omitted in fever, as it reduces the excessive heat, soothes the uneasy sensations, and is indispensable in maintaining that cleanliness which is so desirable in the sick room. Cold water thus applied acts as a tonic, giving vigour and tone to the relaxed capillaries, in which the morbid action probably chiefly goes on. Frequent washing with soap and water also tends to prevent the occurrence of *bed sores*, by keeping the skin in a healthy condition.

4th. *Hydropathic Applications*.—In addition to the sponging and washing just recommended, I have found the *abdominal wet compress* of great utility; it tends to diminish excessive diarrhoea, checks the spread of ulceration of the ileum, and obviates perforation. The compress is made of three or four thicknesses of coarse linen, sufficient to cover the whole abdomen, including the liver and spleen, and extend down to the pubes. This is to be wrung out of cold or tepid water, covered with oiled-silk or India-rubber cloth, to retain the warmth and prevent too rapid evaporation; it may be simply laid on the abdomen, or if the patient is restless it should be secured by three broad tapes round the hips and waist. The compress should fit as closely as possible, and displacement be avoided; otherwise air penetrates between it and the skin, and cold, instead of a moist heat, is produced. As long as the compress continues moist and warm it need not be disturbed; but as soon as it becomes dry it should be re-wetted. Should lung

complications arise, the compress should be applied to the chest as well as the abdomen.

During the early course of the fever, the *Wet Pack*, described page '33, is an invaluable application, and tends, as the author has found, to give a mild character to the disease.

5th. *Beverages*.—In mild cases, and at the commencement of all fevers, pure water, toast-and-water, gum-water, sweetened with a little sugar,* barley-water, lemonade, or soda-water is nearly all that is necessary. Cold water is an agent of supreme importance, and acts favourably by lowering the excessive temperature, and proves a valuable adjunct to the medicinal treatment prescribed, by accelerating those favourable changes which are anxiously hoped for.

6th. *Diet and Stimulants*.—In a disease which lasts three weeks, often five or six, in which the waste of tissue is great, and in which common food cannot be taken, it is a point of high importance to supply the patient with nourishment appropriate to his condition; otherwise he will sink before the disease has completed its course. The following are the chief points to be attended to in the diet of fever patients. All the aliments given should combine both food and drink in a *fluid* or semi-fluid form, until recovery has fully set in. The digestive functions being more or less completely suspended, the nourishment given must be only such as requires the simplest processes for its assimilation. Examples of this form of nutriment are the following:—*milk; thin arrowroot with milk, wine-whey*, prepared by adding one pint of good sherry to two pints of boiling milk, and straining after coagulation; *blancmange of isinglass or ground rice; yolk-of-egg*, beaten up with a little brandy, wine, tea, cocoa, or milk; *beef-tea and animal broths*; and

* For direction to prepare, see the Index.

*alcoholic drinks.** The list might easily be extended, and no good nurse will overlook the importance of *variety* in the nourishment and delicacies for the sick room. *Milk* is an important article in the treatment of fever patients. "Milk or buttermilk is with me," says Dr. Gairdner, "the staple food in typhus; and I will even say that I know of no other food that can be depended on. Yet I see, and always see with a new surprise, descriptions of the treatment and dietetics of fever in which not a word is said about milk, and a great deal about beef-tea, wine, brandy, and all manner of things supposed to be more strengthening, or stimulating than milk diet. Now, I suppose I have not treated a single case of fever of any kind for the last fifteen years without milk, and I always proceed on the understanding that milk in fever is the one thing needful as diet, always to be given, and given liberally, whether specially ordered or not." If, however, fever is attended by symptoms of decided prostration, feeble pulse, a confused and dusky countenance, or hectic, beef-tea or the essence-of-beef should be added to the milk diet and given early. The beef-tea or the broths may be thickened with well-cooked rice or vermicelli, isinglass, or crumbs of bread. The egg-mixture is of great utility; the yolk should be well beaten with a table-spoonful of brandy or wine and as much water, or in a little milk or cocoa, and two or three taken daily. If the prostration is very great notwithstanding the use of the

* "The writer has no intention to side in the controversy concerning the food character of alcohol. He accepts the evidence that much ingested alcohol is got rid of by the excretory organs, or is retained for some time in the tissues after the manner of many medicines. But with food in its widest sense, as what keeps up the vital functions, the physician will have little hesitation in classing alcohol, who has observed the common case of an habitual tippler maintaining for years a fair standard of bodily health upon a quantity of other nutriment wholly insufficient by itself to maintain such health. And to such a case a fever patient offers some resemblance. He, too, may not be able to take enough of other food to maintain him, but alcoholic drinks will help him not to starve. And thus the writer judges them to have a food-value apart from their medicinal action" (BUCHANAN).

nourishment already suggested, wine or brandy, diluted, may be added. A little good wine with an equal quantity of water may be given every hour or every two hours. *Effervescent* wines must be avoided. Dr. Harley advises, six to eight ounces of wine or four ounces of brandy every twenty-four hours when the pulse is of moderate force and under 120. When the pulse ranges between 120 and 130, and is small, double these quantities. If the patient enjoys these stimulants, and desires their continuance, they may be regarded as signs of their utility. The effects of the wine or brandy should, however, be carefully watched by the medical attendant, and only given in proportion to the demands of the system, the bulk and force of the pulse being the main guides. As a rule, stimulants, except in small quantities, are not required by children, or persons who can take a sufficient quantity of other kinds of nourishment, or early in the disease. On the other hand, aged persons, and cases of great prostration, or in which the extremities are cold and the general surface livid, almost invariably require alcoholic stimulants. Under any circumstances, if stimulants aggravate existing symptoms, their employment should be modified or altogether discontinued.

Fever patients are often unable to relish or swallow nourishment in consequence of the dry and shrivelled state of the tongue, and it often becomes necessary to put a little lemon juice and water into the mouth before offering food; in a minute or two the mucous membrane becomes soft and nourishment may be swallowed and enjoyed. *No food to be kept in the sick room.*—Miss Nightingale's suggestion on this point is so important, but, we regret to observe, so often disregarded, that we venture to repeat it here. It is this—do not keep the food, drink, or delicacies intended for the patient, in the sick room or within his sight. The air of the apartment is liable to

deteriorate them, and the sight of them, always before his eyes, to excite disgust. Rather take him up at the fitting time, and by way of surprise, two or three teaspoonsful of jelly, or as many fresh grapes as he may consume at once, or one or two segments of an orange. Or, if it is appropriate to his condition, a small cup of beef-tea, covered, with one or two narrow slips of toasted bread, just from the fire; this is much preferable to the attempting to swallow even a less quantity from a basinful that has been kept for many hours within the reach of the patient's hand and eye.

Lastly, nourishment should be given with strict *regularity*; in extreme and long continued cases of prostration, every hour or half-hour, both day and night. Frequently the functions of digestion and assimilation are so greatly impaired, that the largest quantity of nourishment must be given to sustain the patient till the disease has passed through its stages. Dr. Graves was so strongly impressed with the importance of nourishment in fevers, as to have said that he desired no other epitaph than that *he fed fevers*.

7th. *Watching Patients*.—Fever patients should be attended and watched by day and by night. Their urgent and incessant *wants* require this, and their *safety* demands it. Instances have occurred of patients, in the delirium which so frequently attends this disease, getting out of bed, and even out of the window, during the absence of the nurse, and losing their lives from injuries thus sustained.

8th. *Moderation in convalescence*.—Relapses are very liable to occur from indulging the appetite too freely during convalescence; and, therefore, toast and black tea, jellies, light bread-puddings, white fish, mutton broth, a small quantity of tender chicken, broiled mutton, etc., with a little stale bread and boiled rice instead of potatoes, may only be allowed in great moderation; but never to the capacity of the appetite, till the tongue is quite clean and

moist, and the pulse and skin have become natural. If stimulants have been given they should be gradually withdrawn as the quantity of nutritious food is increased. Even when convalescence has somewhat advanced, moderation should still be exercised, as the appetite is often excessively craving.

9th. *Unnecessary approaches.*—These should be guarded against by persons in health, especially by the young, in whom susceptibility to disease is greatest. Another precaution is, not to visit the sick chamber after long fasting. The great protective influence, however, is *fresh air*; this neutralizes fever poison, and should be uninterruptedly passing through the patient's apartment. With open door and windows, and by avoiding the patient's breath, and the exhalations from his person, till they become well diluted with pure air, fever cases of the very worst kind may be visited fearless of danger. In the particular case of *typhoid fever*, the following additional precautions have been suggested by Dr. Aitken, with the view of checking the spread of this disease:—

(1.) All discharges from fever patients should be received on their issue from the body into vessels containing a concentrated solution of chloride of zinc.

(2.) All tainted bed or body linen should, immediately on its removal, be placed in water, strongly impregnated with the same agent.

(3.) The water-closet should be flooded several times a day with a strong solution of chloride of zinc; and some chloride of lime should be also placed there, to serve as a source of chlorine in the gaseous form.

(4.) So long as fever lasts, the water-closets should be used exclusively as receptacles for the discharges from the sick.

10th. *Change of air.*—The salutary influence of change of climate and scene to persons who have suffered from a serious attack of fever can scarcely be overestimated, and if the place or climate has been chosen with intelligence and judgment, the happiest results may be anticipated. If the change of air includes agreeable society, and excludes all business anxieties, it is a remedy of the very highest importance for bracing up the system, and restoring the patient to his usual health and strength. Often any painful symptoms remaining are at once arrested; the current of the thoughts is turned into new and healthy channels; and in the luxuriance of nature, in the grand scenery of mountainous districts, or inhaling the tonic air of the sea coast, the eyes beam forth with new life, the forces of the circulation are raised and equalized, the mind is unencumbered, and all the functions of the body are pleasantly and healthily performed. After recovery from a serious attack of fever, the whole man becomes changed, and there seems to be a renewal of youth. Nothing gives such a beneficial direction to this change, or renders it so perfect as a temporary removal to a suitable climate and locality. We fully endorse Dr. Aitken's statement,—*No man can be considered as fit for work, for three or four months after an attack of severe typhoid fever.*

11th. *General Preventive Measures.*—To prevent bad forms of fever, the cholera, and other acute and dangerous diseases, the following suggestions should be carried out:—abstinence from alcoholic drinks; temperance in eating and drinking; healthy and cheerful amusements, especially in the open air; industrious occupations, short of exhausting labour; fear should be dismissed from the mind as a base passion, beneath the dignity of man; the light of the sun and fresh air should be freely admitted into every room of the house; all stagnant water around or under the house, should

be drained off; filth—animal and vegetable matters—not allowed to accumulate and decompose about sinks or drains; personal cleanliness should receive due attention, and a sponge, shower, or plunge bath be taken daily; and, lastly, a small bottle of the strong *tincture of Camphor* (the Homœopathic preparation), should always be accessible, so that when unavoidably exposed to infectious and dangerous influences, a drop may be taken before the poison has extended to the blood. As general preventive means, these hints are of the highest importance, and may be carried out in the confident hope of exemption from the threatened evil. The words of Heberden embody a law of nature, the recognition of which is a matter of the highest importance:—"THE SEEDS OF VARIOUS KINDS OF DISEASE, LIKE THOSE OF VEGETABLES, WILL ONLY SPRING UP AND THRIVE WHEN THEY FALL UPON A SOIL CONVENIENT FOR THEIR GROWTH."

4.—Typhus Fever (*Febris Typhus*).

DEFINITION.—Typhus is an acute specific form of fever, highly contagious and infectious, continuing from fourteen to twenty-one days, attended with a lethargic or confused condition of the intellect, and of an eruption on the skin of a measly or mulberry rash, and is the accompaniment of privation, overcrowding, and defective ventilation.

SYMPTOMS.—The precursory stage varies, but is usually short, so that the patient yields to the disease within the first three days, giving up his employment and taking to his bed; in this respect strongly contrasting with the protracted invasive stage of typhoid. Sensations of uneasiness, soreness, or fatigue, loss of appetite, headache, and disturbed sleep, are the early symptoms. The patient is often seized by a rigor, but less marked and severe than in small-pox or internal inflammations, usually succeeded

by dry heat of skin, thirst, quick pulse, white, dry, often tremulous tongue, scanty and highly-coloured urine, sometimes vomiting, heavy look or stupor, prostration, and muscular pains; towards evening there is irritability or restlessness, and if sleep occurs, it is disturbed by dreams, or frequent sudden starts, and is in consequence unrefreshing.

The general appearance of a typhus patient is very marked and affords to the practised eye a ready means of diagnosis. "In an average attack the patient lies prostrate on his back with a most weary and dull expression of face, his eyes heavy and with some dusky flush spread uniformly over his cheeks. In the advanced stage of a severe attack he lies with his eyes shut or half-shut, moaning and too prostrate to answer questions, to protrude his tongue, or to move himself in bed; or the mouth is clenched, the tongue and hands tremble, and the muscles are twitching and half rigid. The dryness of the mouth, the sordes on the teeth and lips, the hot dry skin, and the deafness, are other symptoms which strike an observer so immediately as to deserve to be included in the physiognomy of the disease."*

During the first week the patient complains much of headache, noises in the ears, and, subsequently, deafness. The conjunctivæ are injected, the pupils contracted, painfully sensitive to light, and therefore often closed. He becomes irritable, and his answers short and fretful. After the lapse of a period usually between the fourth and eighth days, the mind passes from a state of excitement to one of delirium. This symptom is usually more severe and appears earlier when the disease attacks persons in the upper classes of society, in consequence, no doubt, of the greater activity of their brains. It is at first one of confusion of ideas as to time, place, persons, and even personal identity, with vague

* "A System of Medicine." Vol. I.

rambling talk, of which occasionally he seems conscious, and from which he can be roused. Afterwards the delirium may become active and maniacal, or low and muttering. The patient often fancies that he is two or three persons, and the subject of a series of miseries and violence; confined in a dungeon, pursued by enemies from whom he vainly flies, or with whom he struggles, and he attempts to spring from bed to reach the door or window to fly from his tormentors. Sometimes the delirium passes into a heavy stupor, with tremulousness of the tongue and hands, and twitching of the muscles (*subsultus tendinum*); but in favourable cases it gradually subsides in two or three days, the powers of the mind begin again to dawn, the countenance assumes a more tranquil aspect, sleep becomes natural, and at length convalescence is fully established.

Diarrhoea is not of infrequent occurrence, but sometimes the bowels are confined; the evacuations are natural or dark, and contrast strongly with the yellow-ochre colour of the stools in enteric fever; finally the evacuations may be involuntary.

THE PULSE.—In typhus the pulse is rarely less than 100, sometimes 120, or 130, or even 140 in the minute. In the last case, however, in adults, it is indicative of great danger. As a rule the pulse pursues a gradually increasing rate of frequency up to the 9th or 12th day, and afterwards undergoes a correspondingly regular decline. Cases so marked almost invariably get well. On the other hand, departures from this gradual rise and fall in the pulse, especially if considerable, mark the existence of complications or dangerous symptoms. In fatal cases of typhus the pulse becomes more and more rapid, and also weaker and smaller up to the very hour of death. The first glimpse of dawning convalescence is afforded by watching the pulse; the *temperature*, as measured by the thermometer, is a valuable

but less available sign; and whenever the pulse is fairly on the decline, especially if it gets stronger and fuller, we may confidently conclude that the patient will recover. The crisis of typhus is often indicated by no other symptom than the gradual decline of the pulse, after having gradually reached its maximum degree of rapidity. There may be no marked perspiration, no critical diarrhoea, no striking alteration in the urine, or startling phenomena of any kind; the only trace of crisis, being the gradual decline of the fever as indicated by the fall in the pulse and the thermometer.

DISTINCTIVE CHARACTERS.—The *typhus rash* appears between the fourth and seventh days, and consists of irregular, slightly elevated spots, of a mulberry hue, disappear on pressure, and may be single and few, or numerous and large; in the latter case two or more spots coalesce. They are usually first seen on the abdomen, and afterwards on the chest and extremities; and the number and depth of colour of the spots are in proportion to the severity of the disease. From the first to the third day after the appearance of the rash, no fresh spots appear; and each spot, although it undergoes certain changes, continues visible till the whole rash disappears, and the disease terminates. In fatal cases, the typhus spots remain after death.

The *odour* of the poison of typhus is very characteristic, and it is described as offensive, pungent, and ammoniacal. Nurses, familiar with the disease, are thus alone able to recognise it, and estimate the amount of danger by the badness of the smell.

Prominence of Nervous Symptoms.—It is from the constancy and prominence of these symptoms that the name of typhus was first employed, and it is almost certain that it is through the nervous system that the poison of the disease chiefly operates. Hence extreme restlessness,

ringing noises in the ears, and low delirium or stupor, are invariably present to a greater or less extent. In fatal cases, about the ninth or tenth day, delirium merges into profound coma, or the condition described as *coma-vigil* may come on. In this latter condition, the patient lies on his back with his eyes wide open, and certainly awake, but indifferent or insensible to everything transpiring around him. His mouth is partially open, his face expressionless, and he is incapable of being roused. At length the breathing becomes nearly imperceptible, the pulse rapid and feeble, or it cannot be felt, and the transition from life to death occurs without any gleam of returning consciousness, and can only be recognised by the eyes losing their little lustre, and the chest no longer performing its slow and feeble movements.

UNFAVOURABLE INDICATIONS.—Early, furious, and persistent delirium, with complete sleeplessness; *coma-vigil*; *convulsions*; involuntary twitchings of the muscles of the face and arms; abundant and *dark rash*, nearly unaffected by pressure; great duskiness of the countenance, or lividity of the surface; involuntary, uncontrollable diarrhoea; suppression of urine, or albuminuria; a brown, hard, *tremulous tongue*; a temperature gradually rising to 107° Fahr., or higher; a great sudden elevation of temperature in the third week; a small, weak, irregular or imperceptible pulse, stationary at above 120°; bed sores, or inflammatory or erysipelatous swellings; a strong presentiment of death on the part of the patient, etc.

CAUSES.—*Overcrowding, with defective ventilation, and destitution*, and thus is the scourge of the poor inhabitants of our large towns. *Overcrowding* includes the several conditions of overcrowding of rooms by too many occupants; overcrowding of dwelling-houses upon too circumscribed area, preventing the proper ventilation of streets and houses; want of personal and domestic cleanliness. A spacious

dwelling, with free ventilation, robs the disease of its power, and arrests its spread to others. *Privation*, as famine through failure of crops, commercial distress, strikes, hardships in war, etc; this predisposes to typhus by deteriorating the constitution. Before the days of Howard, typhus was never absent from our prisons and hospitals; it was the scourge of the armies of the first Napoleon, and it decimated those of the Allies in the Crimea, the disease varying among the troops exactly in proportion to the degree of privation and overcrowding. In 1818, and again in 1847, the failure of the potato crop in Ireland gave rise to an epidemic of this fever, so that it is estimated that an eighth part of the entire population was attacked. There is undoubted evidence that the poison of typhus may be generated *de novo*, and that the circumstances under which this occurs are those above stated, namely, overcrowding, defective ventilation, and destitution. There seems ground for believing that the poison is chiefly transmitted by the exhalations from the lungs and skin; the material poison (*materies morbi*) being inhaled or swallowed, and so finds ready admission to the blood, upon which it exerts its morbid influence. The effects of bad ventilation in the development of typhus is well expressed in the following words: "If any person will take the trouble to stand in the sun, and look at his own shadow on a white plastered wall, he will easily perceive that his whole body is a smoking mass of corruption, with a vapour exhaling from every part of it. This vapour is subtle, acrid, and offensive to the smell; if retained in the body it becomes morbid; but if re-absorbed, highly deleterious. If a number of persons, therefore, are long confined in any close place not properly ventilated, so as to inspire and swallow with their spittle the vapours of each other, they must soon feel its bad effects. Bad provisions and gloomy thoughts will add to their misery, and soon breed the *seminium* of a pestilential fever, dangerous

not only to themselves, but also to every person who visits them or even communicates with them at second hand. Hence it is so frequently bred in gaols, hospitals, ships, camps, and besieged towns. A *seminium* once produced is easily spread by contagion."

TREATMENT.—It is a question whether typhus can ever be cut short, or the definite course of the disease altered by the administration of remedies; some contend that it may be broken up in the first stage, especially by the combination of Hydropathic appliances with the use of Homœopathic remedies; others believe that the disease must have its course. However, we have ample experience to prove that in the great majority of cases the violence of the symptoms can be held in check, the patient's comfort greatly promoted, and convalescence hastened, by judicious treatment.

The remedies appropriate for the ordinary run of cases are the following:—*Acon.*, *Ars.*, *Bell.*, *Bry.*, *Hyos.*, *Opi.*, *Rhus*, *China*.

Remedies for special symptoms are prescribed in the following table:—

1. *Inflammatory Symptoms*.—*Acon.* and *Bell.*
2. *Cerebral Symptoms*.—*Hyos.*, *Bell.*, *Rhus*.
3. *Typhus with extreme Prostration*.—*Ars.*, *Carbo Veg.*, *Phos. Ac.*
4. *With Pulmonary complications*.—*Bry.* *Phos.*
5. *With Gastric derangements*.—*Ipec.*, *Nux Vom.*, *Puls.*, or *Bry.*
6. *With Stupor*.—*Opi.*, *Rhus*.
7. *With Sleeplessness*.—*Coffæa*, *Bell.*
8. *With Putridity*.—*Carbo. Veg.*, *Ars.*, *Verat.*

As we have described the treatment of typhoid with considerable detail, and as many of the symptoms common

to that fever are present in typhus, we shall only offer the following characteristic symptoms:—

Belladonna.—Inflammatory typhus chiefly with *brain symptoms*; fever commencing with rigors in the *evening or at night*; redness of the face; dilated pupils, with wild, unsteady expression.

Hyoscyamus.—In the delirium of typhus, with *sudden startings as in affright*, this remedy should never be overlooked; it often acts like a charm after *Bell.* has effected but little improvement.

Opium.—*Stertorous breathing*; low moaning noise; muttering delirium, or delirium after a short sleep; *dusky* flush of the countenance; picking at the bed-clothes; *coma vigil*; involuntary discharges of *fæces* and urine.

Rhus Tox.—In the *low forms of typhus*, with great debility, almost amounting to paralytic weakness of the limbs; small and quick, or weak and slow, pulse; anxious and depressed mood; oppression of the chest.

Arsenicum.—Rapid prostration of strength; *sunken countenance* and eyes; red, brown or blackish, dry, cracked, and trembling tongue; insatiable, *burning thirst*; sensation as of hot water coursing through the veins; rapid, small, irritable pulse.

ACCESSORY MEASURES.—The points of greatest importance may be briefly summed up as under: (1.) The patient should be placed in a large, or at least in a well-ventilated, room, so as to secure a continuous and amply supply of fresh air. Cases occurring in close, crowded rooms in which this prime hygienic condition cannot be secured, should be removed to a properly constructed hospital. (2.) Frequent changes of personal and bed linen, changes of posture to avoid congestion and bed-sores; if bed-sores form notwithstanding, the patient should be placed on a *water-bed*; also the *net pack* is a valuable measure,

especially early in the disease, and when the skin is dry and hot. (3.) Food or beverages should be given in small quantities at regular and frequent intervals, including water, milk-and-water, tea, broth, beef-tea, and, if prostration, feeble and irregular circulation, or complications, indicate their use, wine or brandy. In some cases in which patients obstinately refuse all food, or are unable to swallow, life is often saved by nutritious or stimulating enemata. (4.) Quiet, or in noisy streets stuffing the ears with cotton wool; cleanliness, sponging the whole surface of the body and careful drying at least once a day, and intelligent and unremitting watching.

The hints on nursing fever patients in the previous section should be studied.

PROPHYLACTICS.—As disinfectants, fresh air, efficient ventilation, and cleanliness are of paramount importance; as additional means for avoiding contagion but by no means as substitutes, whitewashing with quick lime, repapering infected rooms, washing the wood-work with soap and water, cleansing the linen in water to which chloride of lime has been added, and the use of this substance or of carbolic acid in the water employed in sponging the patient. Without cleanliness and fresh air, vinegar, camphor, and other so-called preventives, are useless, and only disguise noxious vapours. Persons in attendance on the sick should especially avoid the odour from the breath and the exhalations which arise on turning down the bed-clothes. Nurses should not be overworked, deprived of repose in bed, or of daily out-door exercise. If there is any ground to fear an attack of typhus, *Bry.* and *Rhus.* are the best preventives.

5.—Intermittent Fever (*Febris Intermittens*)—Ague.

DEFINITION.—The disease known as ague, consists of severe paroxysms of fever, characterized by a cold, a hot, and a sweating stage, between which there is a period of comparative health, in which the patient is able to follow his usual occupation.

Two centuries ago, when the soil around London was neither cultivated nor drained, and when during portions of every year, the marshes of Lincolnshire, Cambridgeshire, and adjoining counties sent forth their emanations of malaria, ague was a very fatal disease in this country. James I. succumbed to its power in London, March, 1625. When told by his attendants that “an ague in spring is physic for a king,” James replied that “the proverb only held good to a *young* king.” In 1658, Oliver Cromwell died from it at Somerset House.

Geographical facts, collected by medical writers from Hippocrates downwards, show that every country is unhealthy in proportion to the quantity of marshy or undrained alluvial soil it contains, the inhabitants of such districts dying often in the ratio of 1 in 20 instead of 1 in 38—the average mortality in healthy districts. The connexion of a given class of disease—represented by remittent and intermittent fever—with marshy districts is now distinctly established and generally recognised (ARTKEN).

The disappearance of ague has always been in direct relation to the drainage and cultivation of the soil, not only in England, but in every portion of the globe. If the cultivating hand of man is withdrawn from a district, and the former conditions reappear, malaria again becomes rife.

SYMPTOMS.—These may set in suddenly, or they may appear gradually, until a regular paroxysm occurs. An ague fit has three stages—the cold, the hot, and the

perspiring. The *first stage* comes on with a feeling of debility, lassitude, weariness, chilliness, and rigors; then follow sensations as of cold water trickling down the spine and a shivering of the whole body: the teeth chatter, the nails turn blue, and the whole frame trembles, often with such violence as to shake the bed on which the patient may be lying. The face becomes pale, the features and skin contracted, and the papillæ of the skin are rendered so prominent as to give it the appearance aptly described as *goose skin*, such as may at any time be produced by exposure to cold. These symptoms are accompanied by an anxious expression of countenance, the eyes are dull and sunken, the pulse frequent and small, the breathing hurried and oppressed, the tongue white, and the urine scanty and frequently passed. After a period, varying from half an hour to three or four hours, the *second* or *hot stage* comes on with flushings, until the entire body becomes hot, with extreme thirst, full bounding pulse, throbbing headache, and restlessness, the urine being still scanty, but high-coloured. At length, after two, three, and even six or twelve hours, the *third* or *perspiring stage* succeeds, and the patient feels much relieved. Thirst diminishes, the pulse declines in frequency, and the appetite returns; at the same time there is a red deposit of *urates* in the urine. The perspiration first breaks out on the forehead and chest, and gradually extends over the entire surface of the body; sometimes it is only slight, but at other times it is very copious, saturating the patient's linen and bed-clothes. A paroxysm usually lasts about six hours, allowing two hours for each stage. The period between the paroxysms, as already explained, is called the *intermission*; but by an *interval* is meant the whole period or cycle between the beginning of one paroxysm, and the beginning of the next.

TYPES.—There are three chief types of ague; 1st.—*The Quotidian*, has a paroxysm daily, coming on generally in the morning, from about 7 to 9 o'clock, has an interval of twenty-four hours, and is most common in the spring. 2nd.—*The Tertian*, has a paroxysm every other day, coming on from 10 to 12 o'clock at noon, has an interval of forty-eight hours, and is most frequent in the spring and autumn. 3rd.—*The Quartan*, which has a paroxysm every third day, coming on from 2 to 4 p.m., has an interval of seventy-two hours, and is most common in the autumn. The hours of the day during which the paroxysms occur are, however, by no means uniform. The tertian is perhaps the most frequent, and has the most marked hot stage; but the quartan is the most obstinate. There is still another type in which, though there is an attack every day, those only resemble each other which occur on alternate days.

PATHOLOGY.—It is probable that in the cold stage, the blood leaves the surface and the capillaries, and accumulates about the right side of the heart, the large veins and great venous organs of the interior, such as the liver, spleen, and the bases of the lungs. In the hot stage, the heart reacts and throws out the blood again to the surface, but beyond the conditions of health, so that it is rendered preternaturally dry and hot, with all the symptoms of inflammatory fever; in the sweating stage the secretions are re-established, and the proper balance between the large and small blood vessels is restored.

LAWS.—Although at present ignorant of the physical or chemical nature of this *aerial poison*, we know that malaria obeys the following laws, which, being of great practical use, are worth remembering. 1st.—It spreads in the course of *prevailing winds*. It has always been observed that when the wind blows across malarious tracts of land, the disease prevails on the opposite side to that from which the current

proceeds ; at the same time the inhabitants of the ventilated district escape. 2nd—Its progress is arrested by *water*, especially by *rivers* and large *running streams*. Thus persons on board ship, or on the side of water opposite to a marsh, are unaffected by it, although a favourable wind transmits the poison a far greater distance by land. Water probably absorbs malaria ; and it is a common opinion in India that water so charged produces periodic fevers in those who drink it. In like manner, thick *rows of trees* intercept the progress of the poison. 3rd—Malaria does not rise above the *low level*. It seems to be of greater specific gravity than atmospheric air, its power diminishing as we rise from the surface of the earth. Persons occupying the upper stories of a house in an infected locality suffer to a far less extent than those living on a ground floor. 4th—It is most dangerous at *night*. It has been often observed that sailors who go on shore in the daytime, when off a malarious coast, do so with no bad results ; but that those who remain on the shore during the night are almost invariably seized with fever.

EFFECTS.—From the recurrence of internal congestions in each cold stage, the function of the liver, bowels, and sometimes the kidneys, is disordered ; the patient becomes sallow, his limbs waste, but his abdomen is distended, and his bowels are constipated. The spleen is especially liable to be enlarged, sometimes to a great extent, when it can be felt externally, attaining a weight of many pounds. An enlarged spleen is popularly called *ague cake*. “The heat-generating power of all victims to malaria is impaired ; hence they suffer from atmospheric changes, of which healthy men take no note” (*Macleay*). Another result is extreme liability to repeated attacks ; for the disease often leaves the body so enfeebled, that ague may be reproduced by agencies which, under other circumstances, would produce no ill effects.

CAUSES.—This disease is called an *endemic*, because it is peculiar to a particular locality or country. The *exciting cause* of ague is an exhalation of invisible particles from the surface of the ground, known by the term *malaria* or *marsh miasma*. Malaria is thought to be the product of *vegetable* decomposition in soils, and is inhaled by the lungs during breathing, and thence absorbed into the system. The emanation takes place from marshy lands which have been flooded with water and dried under the influence of the sun's heat, and is most rife in the spring, and when the rains fall upon the decaying leaves of autumn. It is not due, as was formerly supposed, to putrefaction of animal matter. All that seems to be essential to the production of malaria, is the continued action of the sun on moisture stagnant upon or near the surface of the ground. A certain amount of moisture is necessary; for a very dry season which desiccates a marsh stops the malaria; while the deposit of the evening dew always favours its production. Excess of moisture, on the other hand, checks its development, so that a very wet season, as well as a very dry one, may render a marsh less unhealthy. But extreme heat does not diminish malaria on the banks of rivers, because portions of these are never dry. The shores of the Black Sea and the Mediterranean are always malarious at the commencement of hot weather, as in the absence of a tide there is none of that frequent salt washing and drainage which purifies other European shores (*Williams*).

The *predisposing causes* are fatigue, exhaustion, insufficient or improper diet, intemperance, exposure to night air, and previous attacks of ague.

TREATMENT.—This is divided into the *Palliative* and the *Curative*. The *Palliative* is adopted during the paroxysms to mitigate the immediate symptoms, and consists chiefly in imparting warmth during the cold stage, removing the

patient's coverings and giving cooling drinks during the hot; and supplying him with *warm* and *dry* linen when the perspiring stage has passed by.

The *Curative* is adopted during the intermission, and is of the greatest importance. The following are the chief remedies in our short list:—*ARSEN.*, *CHIN.*, *Carb. Veg.*, *Bry.*, *Verat.*, *Nux V.*, *Puls.*, *Fer.*, etc.

The object of treatment is not, therefore, directly to arrest the paroxysms, but to bring about such a healthy condition of the system that the disease may gradually decline, until it disappears altogether. It is often observed that persons who have been drugged with large doses of *bark* and *quinine* look sickly and debilitated, and that ague returns again upon trifling exposures. It may be necessary to persevere for several weeks with the appropriate remedy, and not to change it too frequently, or at all, if the paroxysms become less severe, and occur at later periods of the day.

Arsenicum.—This is indicated when the stages are not clearly marked, as in the simultaneous occurrence of shivering with heat, or shivering alternating with heat, or internal shivering with external heat; *burning heat*; *insatiable thirst*; *great debility*; tenderness of the liver and spleen; nausea; *violent pains in the stomach*; great anxiety; tendency to *dropsical affections*; also when *Cinchona* has been used in excess. A dose every four hours between the paroxysms if they occur daily, or once in six hours if they occur every second or third day. In *brow-ague* and *hemi-crania*, occurring in marshy districts, *Arsenicum* is very efficacious.

China.—A prominent remedy in well-defined cases of ague in which all three stages are distinctly marked, and take place in their regular order, and especially when the fits occur in marshy districts; also where there exist previous to the attack nausea, thirst, headache, palpitation, anxiety, sneezing, etc. The symptoms are: *yellowish complexion*, drowsiness

after a meal, soreness or swelling of the liver or spleen; watery, slimy, or bilious diarrhoea; sensation of chilliness or shuddering after drinking, etc. A dose every four or six hours, one being administered an hour before a paroxysm is expected to occur. Should *Quinine* have been administered in excessive quantities, *Carbo Veg.* or *Ars.* should be substituted for *China*.

Ipecacuanha.—Nausea, vomiting, and other *gastric symptoms*, worse in the evening; external heat aggravates the shiverings, slight thirst during the shiverings, with extreme thirst during the heat; also in paroxysms in which the sweating stage is indistinctly marked.

Nux Vomica.—This remedy is more particularly indicated when the paroxysms occur in the afternoon or evening, and where there are aching pains in the forehead, giddiness, nausea, bitter taste, constipation, a kind of paralytic weakness of the limbs, etc. It is well indicated in persons who take strong drinks, of sedentary habits, or whose occupations are mental rather than bodily.

Bryonia.—Paroxysms preceded or accompanied by *cough*, difficult breathing, *pain in the chest or side*, *thickly-coated tongue*, headache or vertigo, constipation or diarrhoea, etc.; also when coldness is more marked than heat.

Mercurius.—Profuse and foetid perspirations, staining the linen yellow.

When gastric or bilious derangements are prominent symptoms, or when dietetic errors have occasioned an attack, one of the following remedies may be administered: *Ant. Crud.*, *Verat.*, *Puls.*, *Ign.*, or *Bell*.

When the object is to destroy the predisposition to a recurrence of the ague, and to eliminate from the system those morbid products upon which such tendency depends, *Carbo Veg.*, *Lyc.*, or *Sulph.*, should be administered for a considerable period, once or twice daily. The choice of the

appropriate remedy is a point of great importance, and after such a selection has been made the remedy should be steadily persevered with.

A much larger list of remedies is often prescribed, but the author has treated most unpromising cases with complete success, by means of a small selection.

Treatment of Enlarged Spleen.—Should this organ continue undiminished in size, we have a powerful remedy in the ointment of the *biniodide of Mercury*, applied over the gland. The experience of many practitioners in India having demonstrated the extraordinary efficacy of this remedy in cases of goitre, it has of late years been successfully used in some parts of India as a remedy in solid enlargements of the spleen. It has been very successful at the R. V. Hospital, Netley; in some cases, where the spleen has extended down into the pelvis, it has, after several applications, been reduced almost to its normal limits. It has acted just as energetically on enlarged malarial livers. This mode of treatment is worthy of extensive trial, because in not a single example has it induced any unpleasant constitutional action (*Maclean*).

ACCESSORY MEANS.—One of the first and most essential points is, if possible, the removal of the patient to a more healthy locality. Removal from an aguish district to a dry bracing situation, is often immediately attended by a very marked improvement in the health. As patients frequently appear quite well between the paroxysms, particular caution is necessary against exposure; they should not venture into a damp or chilly atmosphere, remembering that the poisonous miasma is most powerful at NIGHT, and near the SURFACE OF THE GROUND; hence they should not remain out of doors in the evening, or go out too early in the morning, at least not without first taking breakfast. They should also select the *loftiest* part of the house to sleep in. The light and heat of

the sun and the air should be freely admitted during the middle of the day, but the night air carefully excluded. Fatigue should be avoided; also sitting or standing in a current of air. Clothing should be of a suitable character, and sufficiently ample to be comfortable.

Diet.—On the days in which the fits occur, the food should be light, and taken in small quantities, observing great care until the paroxysms entirely disappear, not to tax the digestive system too heavily. As a rule, gruel, arrow-root, sago, or corn-flour, during the intervals between the fits; light puddings made of bread, tapioca, or sago, or a small quantity of mutton or chicken broth may also be allowed; and, in some cases, a little tender meat, well masticated, may be taken.

PREVENTIVES.—Persons living in aguish districts, during the prevalence of the disease should take a dose of *China* night and morning. When compelled to be in a malarious atmosphere early in the morning or late in the evening, a good *respirator* should be worn, or in the case of men the beard should be cultivated.

6.—Hectic Fever.

Hectic (a Greek word signifying *habitual*) has been termed a most exaggerated form of symptomatic fever. It is most appropriately called *hectic*, because when once set up it becomes an habitual condition. The sweating and diarrhoea of hectic are sometimes called *colliquative*, because they melt down, as it were, the strength and substance of the body.

SYMPTOMS.—It is a remittent fever, and the exacerbations occur towards evening; and are attended with flushing of one cheek, or a circumscribed flushed spot appears upon either, contrasting strongly and beautifully with the pale cheek, with burning heat of the palms of the hands and

soles of the feet, and extreme restlessness. Towards morning, however, there is a remission, and the patient falls asleep, and, when he wakes, is bathed in perspiration. The pulse is small and weak, and greatly accelerated, reaching 120 beats in the minute, or more; "the beat being performed with a jerk, as if the result of irritation upon a weakened heart." The pulse is quickened by any exertion, by excitement, or even by food; the bowels are relaxed with diarrhoea, especially in advanced stages of the disease, the diarrhoea aggravating the sweating, and consequent exhaustion; the tongue is furred white or brown in the centre, but unnaturally red around the tip and edges; the urine deposits the red brick-dust or pink sediment, consisting of the urates of soda and ammonia; the skin is clammy except during the inflammatory stage, when it is burning hot; the complexion is clear, the eyes are bright and sparkling, and there is most marked emaciation, especially as death approaches. The mind usually remains bright, often vigorous, and hopeful, except towards the end, when slight delirium sometimes occurs.

CAUSES.—Long-continued disease, especially when attended with *profuse suppuration*. It is one of the fearful accompaniments, and frequently a most characteristic symptom of *Consumption*. When our diagnosis of that disease wants confirmation, the appearance of hectic often furnishes the melancholy but decisive proof. The cause in this and other instances is an habitual drain upon the system beyond the amount of nourishment supplied or appropriated, so that the excessive waste is not counterbalanced by any adequate reparative process. Sometimes hectic is unconnected with any suppurative process, it being the result of a wasting of the bodily substance, as in too prolonged nursing, excessive sexual indulgences, etc.

TREATMENT.—The only cure for *hectic fever* is the removal of the original cause on which it depends; but when that is

impossible, the treatment must be directed towards moderating the symptoms as they occur, and supporting the system by the most concentrated nutriment, and tonics. The medicines most likely to be of service are, *China*, *Ars.*, *Phos. Ac.*, *Hepar Sulph.*, *Calc.*, *Carbo Veg.*, *Sulph.*, *Nux Vom.*, etc.

ACCESSORY MEANS.—Generous diet, wine, change of air and scene, and pleasant associations. Any cause likely to favour hectic, such as too prolonged nursing, in which a drain upon the system is established beyond its means, and which depress the mind and enfeeble the body, must be strictly avoided.

7.—Hay-Fever—Hay-Asthma (*Catarrhus æstivus*).

This is a singular species of summer catarrh to which only few persons are liable.

SYMPTOMS.—They are those of an ordinary severe cold, to which those of asthma are superadded. The patient complains of sneezing; profuse discharge from the nose; irritation of the eyes, nose, and air-passages; tightness of the chest, and dyspnoea, sometimes with, and sometimes without, mucous expectoration; pricking sensations in the throat; harassing cough, etc. Exposure to the powder of *Ipecacuanha* gives rise to similar symptoms in many persons.

CAUSES.—An emanation from certain grasses in May or June, during the haymaking season. It only occurs at this period, and persons susceptible of its influence escape by removal from the neighbourhood of hay-fields or hay-stacks.

TREATMENT.—*Ipec.*, *Ars.*, *Euphrasia*, *Puls.*, and *Merc.*, are remedies which the writer has used with good results. The choice of the remedy must depend upon the accompanying symptoms.

ACCESSORY MEANS.—Removal to the sea-coast, or to any part where grass does not grow, or hay is not stored, offers the surest protection. The cold shower bath, the Turkish bath, and the use of a respirator, are also recommended.

CHAPTER II.

THE ERUPTIVE FEVERS. (*Exanthemata*).

THE *Exanthemata* or eruptive fevers may be regarded as continued fevers, having an eruption superadded. They have the following common characters:—they arise from a specific contagious poison, between the reception of which and the occurrence of the symptoms, a variable time elapses; run a definite course; are accompanied by a specific inflammation of the skin, called the eruption, which passes through a regular series of changes; affect some part of the mucous membrane as well as the skin; and, as a general rule, only attack an individual once during life.

The true *Exanthemata*, including all these characteristics, are, the *small-pox*, *measles*, and *scarlet-fever*; but there are other less perfect forms, as *chicken-pox*, *nettle-rash*, and *rose-rash*; even *continued fever* itself is classed with them. These diseases are called by the Registrar-General, *Zymotic diseases*, a term implying their origin in a poison which acts like a *ferment* in the blood, and are regarded by sanitary reformers as preventible diseases. They have all a latent period intervening between the reception of the contagion and the accession of the fever, during which time the patient is to all appearance in good health.

The following table, from Dr. Tanner, shows the latent period or period of incubation, and the accession and disappearance of the eruption in the three great eruptive fevers.

| Disease. | Period of Incubation. | Eruption appears. | Eruption fades. |
|---------------|-----------------------|----------------------|--|
| Scarlet Fever | 4 to 6 days. | On 2nd day of fever. | On 5th day of fever. |
| Measles | 10 to 14 days. | On 4th day of fever. | On 7th day of fever. |
| Small-pox .. | 12 days. | On 3rd day of fever. | Scabs form on 9th or 10th day of fever, and fall off about the 14th. |
| | | | |

1.—Measles (*Rubeola, Morbilli*).

FORMERLY this disease was confounded with scarlatina; but there are well-marked differences which are pointed out a little further on. Measles, presenting symptoms varying according to constitutional or atmospheric peculiarities, is generally unattended with danger, unless improperly treated. Children are usually the subjects of its attack; but when adults succumb under its influence, it is a severe or even dangerous disease. Like scarlatina and small-pox, it is highly contagious, often epidemic, and generally attacks the same patient only once.

MODES OF PROPAGATION.—No susceptible person can remain in the same room or house with an infected person without risk of taking the disease; and it is almost impossible to isolate the disease in large establishments or schools. It is propagated by *fomites*. This is proved by the fact that children's clothes, sent home in boxes from schools where the disease has raged, communicate the disease; and also by the same circumstance resulting when susceptible children have lain in the same beds, or in the same room, shortly after it has been occupied by patients suffering from the disease (*Aitken*). The danger of the spread of contagion from *measles*, *scarlatina*, etc., only ceases when *desquamation* (scaling) of the *cuticle* (scarf skin) is complete.

SYMPTOMS.—Measles passes through its courses by stages; there is its period of *incubation*, lasting from ten to fourteen days; its precursory fever; its eruptive stage; and its decline. The introductory fever is ushered in with lassitude and shivering, which are soon succeeded by heat of the skin, quickened pulse, loss of appetite, thirst, etc. But the peculiarity of the early symptoms is, their resemblance to those of a *common cold*, such as sneezing; red, swollen, and watery eyes; discharge from the nose; a hoarse, harsh

cough; fever; and sometimes, diarrhoea and vomiting. These symptoms usually increase in intensity till about the fourth day, the eruption appears, first on the face, then on the neck and breast, and soon after on the whole body. It is in the form of minute pimples, which multiply and coalesce into blotches of a more or less crescentic form, slightly raised above the surrounding skin, so as to be felt, particularly on the face, which is a good deal swollen. The eruption is two or three days in coming out, and remains at least three days; the fever then abates, and the eruption declines, becoming browner as it fades, and the cuticle is afterwards thrown off in a fine bran-like scurf. As the rash declines, diarrhoea sometimes occurs; this, unless very troublesome, should not be interfered with, as it is often beneficial.

Table shewing the chief differences between *Measles* and *Scarlet Fever*.

| MEASLES. | SCARLET FEVER. |
|---|--|
| 1. The rash is of a <i>pinkish-red</i> or <i>raspberry-colour</i> . | 1. The eruption is of a <i>bright-scarlet-colour</i> . |
| 2. The eruption is somewhat <i>rough</i> so as to be felt by passing the hand over the skin, and is in groups or in rounded or <i>irregular-shaped masses</i> . | 2. The rash usually presents no <i>inequalities</i> to sight or touch, and is so minute and closely crowded as to give the skin a <i>uniform red</i> appearance. |
| 3. <i>Catarrhal</i> symptoms are prominent—watery discharge from the eyes and nose, sneezing, harsh cough, etc. | 3. Great <i>heat of skin</i> , <i>sore throat</i> , and sometimes delirium, are the chief symptoms. |
| 4. The cuticle is thrown off in minute portions like <i>scales of fine bran</i> . | 4. Desquamation of the cuticle is in <i>large patches</i> , especially from the hands and feet. |
| 5. The most common <i>sequelæ</i> are diseases of the <i>lungs</i> , <i>eyes</i> , <i>ears</i> , and <i>skin</i> . | 5. The most frequent <i>sequel</i> is <i>anasarca</i> , especially after mild cases. |

TREATMENT.—In mild form of measles, *Acon.*, *Puls.*, and *Sulph.* Severe and complicated cases, *Acon.*, *Bell.*, *Bry.*, *Carbo Veg.*, *Ipec.*, *Merc.*, *Arsen.*, *Phos.*, *Puls.*, and *Sulph.*

Aconitum.—If fever symptoms are well marked at the outset, or during the progress of the disease, this remedy should be administered every two or three hours as long as it may be necessary to diminish the fever. Even after other remedies have been administered, *Acon.* may have to be repeated, to control inflammatory action.

Pulsatilla.—Almost a specific in this disease, and may be given when the fever has been subdued by *Aconitum*; sometimes it may be advantageously given in alternation with it, if both catarrhal and fever symptoms are present; but if the first indications of measles are chiefly those of a common cold, it may be given alone. This remedy is especially valuable for the following symptoms:—Cough, worse towards evening, or during the night, with rattling of mucus in the air passages, or much expectoration of thick, yellowish or whitish mucus, sometimes followed by vomiting, or partial suffocation; thick, greenish or yellowish defluction from the nose; bleeding at the nose; derangement of the stomach. A dose every three or four hours.

Ipecacuanha.—Nausea, vomiting, gastric derangement.

Ammon. Carb.—This remedy is useful in cases in which the eruption is slow in making its appearance, and may be given in repeated doses to assist it.

Belladonna.—Sore throat, with pain and difficult swallowing; dry *spasmodic* cough; inflammation of the eyes; restlessness, and tendency to *delirium*. A few doses, at intervals of two or three hours.

Bryonia.—Imperfectly developed or suppressed eruption; stitching pains in the chest, difficult breathing, cough, etc. A dose every two or three hours. In addition to this remedy, a sudden recession of the eruption might necessitate a *warm bath*.

Mercurius.—Glandular swellings in the neck, ulcers in the mouth and throat, bilious diarrhoea, dysenteric stools, etc.

Phosphorus.—Pale colour of the eruption, or imperfectly or irregularly developed; dry, hollow cough; pain in the chest; nervous or typhoid symptoms.

Under the last condition, *Arsen.*, *Carbo Veg.*, *Rhus Tox.*, *Phos. Ac.*, and *Sulph.* may also be considered.

Sulphur.—This remedy is required after the eruption has completed its natural course, and the other medicines are discontinued. A dose every night and morning, for three or four days; afterwards every morning for a like period will generally be sufficient. For dose, etc., see page 49.

DISEASES FOLLOWING MEASLES (*Sequelæ*).—Measles is often succeeded by diseases which are more difficult to treat, and more dangerous than the complaint itself; but, except in scrofulous or tuberculous children, they are generally the result of irrational treatment; under homœopathic management patients usually recover rapidly and perfectly. The diseases of most frequent occurrence after an attack of measles, are inflammatory affections of the eyelids; purulent discharge from the ear; swelling of the glands, chronic cough or hoarseness; pneumonia; bronchitis; consumption; cutaneous eruptions; and various other weaknesses.

These diseases are referred to in other parts of this manual, and may be found by the index, and nearly all of them require professional treatment. As a general rule, the following remedies may be consulted:—*Bell.*, *Calc. C.*, *Carbo. V.*, *Merc.*, *Phos.*, *Puls.*, or *Sulphur*. The last-named remedy, if used when the disease is declining, will often prevent the occurrence of the complaints enumerated above.

ACCESSORY MEASURES.—*Cold* water, gum-water: no stimulants should be given. As the fever abates, milk diet, gradually returning to a more nourishing kind of food. In this, as in the other eruptive fevers, the wet pack, described page 33, is of essential service. The patient should be

kept in bed, and the room sufficiently darkened to protect the sore eyes, but the proper and constant circulation of pure air must by no means be interrupted. The temperature of the patient's room should be about 60° Fahr., and it should not be liable to rapid changes. Except during the very height of summer, a fire should be kept burning in the room. Tepid sponging, followed by careful drying, is necessary *several times* a day, also a frequent change of linen. After the disease has subsided, the patient should be warmly clad and taken into the open air *frequently*, when the weather is fine. He must not, however, go out of doors too soon, or be in any way exposed to cold. Prevention of exposure to cold and wet is of great importance during convalescence, in consequence of the excessive susceptibility to inflammatory affections of the chest.

PREVENTIVE TREATMENT.—This is of little consequence, as the danger of measles under homœopathic treatment is so trifling that parents need concern themselves but little about it. It may, however, be often prevented or modified by giving children who have not had the disease a dose of *Pulsatilla* every morning, and one of *Aconitum* every evening, for a week or ten days, during its prevalence in the neighbourhood. *Puls.* has undoubtedly great influence over measles, being in this disease just what *Bell.* is to scarlatina.

2.—Scarlet Fever—Scarlatina.

Like measles, this is an infectious and contagious, but much more to be dreaded disease, chiefly affecting children, and rarely occurring more than once in the same person. The second, third, fourth, and fifth years of life are those in which it is most prevalent; after the tenth year its frequency rapidly declines. The opinion that the disease does not attack children under two years of age is very erroneous, as the following statistics prove. In 1862, the deaths from

this disease in England were 14,834; out of this number 9,569 were children under five years of age, and of these 903 were infants, under twelve months old. Infancy therefore offers no exemption to severe attacks of scarlatina.

The increasing prevalence of scarlatina during the present century leads us to assign to it that pre-eminent rank among the causes of the mortality of childhood which was formerly occupied by small-pox; indeed it is probable that as small-pox has declined since the introduction of vaccination, scarlatina has proportionately increased, so that the mortality from it greatly exceeds that from measles and small-pox combined. In the year 1863, the mortality for this disease in London alone was 4,982, a year remarkable for the wide-spread character and fatality of this epidemic. Nor were its ravages restricted to London, for scarcely a town or district of England escaped.

SYMPTOMS.—Scarlatina commences with the ordinary precursors of fever—cold chills, succeeded by hot skin, shiverings, nausea, and sometimes vomiting, frequent pulse, thirst, and sore throat. In about 48 hours after the occurrence of these symptoms, a rash is perceptible, first on the neck and breast, and is gradually extended over the great joints, limbs, and trunk, till the whole body is covered with it. The eruption is of a *bright-scarlet colour*, and consists of innumerable red points or spots, which have been compared to a boiled lobster-shell in appearance. These spots either run together, and diffuse themselves uniformly over the skin, or else appear in large irregular patches in different parts of the body. At the same time, the appearance of the tongue, as afterwards described, is very characteristic of the disease. A diffused redness, sometimes of a dark claret colour, covers the mouth, fauces, etc., which disappears as the febrile symptoms and rash subside. On about the fifth day, the *efflorescence* generally begins to decline and gradually goes

off by desquamation of the cuticle, in the form of scarf, from the face and trunk; but from the hands and feet large flakes are separated, so that sometimes the scarf-skin comes away entire, like a glove or slipper. On about the eighth or ninth day the eruption has entirely disappeared, leaving the patient in a weak condition.

It is not always, however, that the disease pursues this uniform course. Sometimes the eruption is livid and partial, and is attended with prostration so extreme that the patient sinks in a few hours under its virulence. In puerperal women, it is a most malignant disease, and nearly always fatal; during pregnancy it almost invariably leads to abortion and death.

VARIETIES.—There are three forms of this disease, viz.:—
1. *Scarlatina simplex*, in which the skin only appears to be affected; this form may be expected to terminate quite favourably under proper treatment. 2. *Scarlatina anginosa*, in which both skin and throat are involved, and is the variety commonly known as “scarlet fever;” this has many points of danger, and in several ways may jeopardise the patient’s life. 3. *Scarlatina maligna*, in which extreme depression of the vital strength and great cerebral disturbance are superadded to the affection of the throat and skin, the fever soon assuming a malignant or typhoid character. The tongue is brown; there is low delirium; the throat is dark, livid, or even sloughy; the eruption comes out imperfectly or irregularly, is darker than just described, or alternately appears and disappears. In many cases, this form of the disease terminates fatally on the third or fourth day, and is always one of such extreme danger that none but patients of very vigorous constitutions, and when skilful treatment is commenced early, survive it.

DISTINCTIVE FEATURES OF SCARLATINA.—(1.) The *scarlet rash*, already described.—(2.) *The high temperature of the*

skin and blood. The thermometer placed in the arm-pit (*axilla*) rises to 105° Fahr., sometimes to 106°; 98° being the normal standard.—(3.) The papillæ of the tongue are *red and prominent*, and may be first seen projecting through a white fur, or, as this fur clears away, on a red ground, and has been termed “the strawberry tongue.”—(4.) *The sore throat.* The throat is congested and swollen round the soft palate and tonsils, and the mucous membrane of the mouth and nostrils are generally affected.

SCARLATINA AND MEASLES.—For the chief differences between these diseases, see the table in the section on *Measles*.

CAUSE AND MODES OF PROPAGATION.—The poison of scarlet fever is of a subtle nature, the earliest source of which is distinctly traceable to Arabia; and the disease has now spread over the whole world (*Aitken*). It has been found to spread more extensively, and with greater fatality, among the poor than among the rich. It may be transmitted by *fomites*—clothes, bedding, carpets, etc.; this is proved by the fact that medical men have often carried the disease to their own families. The poison may be destroyed by a temperature of 205° Fahr., or by disinfection and ventilation. The infecting power probably commences as soon as the primary fever has set in, and continues till desquamation of the cuticle is complete, and attains its maximum degree at the commencement of desquamation.

TREATMENT.—It should be laid down as a maxim that in Scarlatina, medical advice ought always to be had recourse to; for the worst cases we meet with (as those in which mortification of the nose, cheek, or limbs, sometimes takes place) are those in which the disease has, from its apparently mild character, been left to itself (*Aitken*).

Belladonna.—Immediately Scarlatina is suspected, and especially when the rash appears, the swallowing becomes difficult, the throat and eyes become inflamed, and there is

sleeplessness and nervous excitement, attended with starts and jerks, administer *Belladonna*, every two or three hours, according to the severity of the symptoms, and as long as the eruption is *bright-red*. This medicine exerts a direct power over scarlet fever, and the disease, in its less malignant form, will frequently yield to its action, without the aid of other medicines.

Aconitum.—If the febrile symptoms are very severe, indicating a tendency to inflammatory action in any particular part, a few doses of this medicine may precede *Bell.*, or be alternated with it.

Mercurius.—If the throat is much inflamed, swollen, or ulcerated; when there is an acrid discharge from the nostrils, profuse secretion of saliva, or ulcers in the mouth, this medicine should be employed, and will often most suitably follow the administration of *Belladonna*.

Arsenicum.—If the disease is attended with great prostration of strength, rapid emaciation, cold clammy sweats, frequent and weak pulse, nightly paroxysms of fever, with burning heat, and threatening *dropsical affections*, this remedy is especially indicated, and should be administered every three or four hours.

Coffea.—Extreme *restlessness*, irritability, and a whining disposition, particularly at night.

Calcareæ.—Scarlatina, complicated with scrofula, and in patients previously troubled with cutaneous eruptions, and more especially if they have been suppressed. A dose occasionally during the progress of the disease, and continued night and morning for a week or two after it has declined.

Sulphur.—Under similar circumstances to *Calcareæ*; it is valuable as a preventive of the secondary diseases so frequently succeeding scarlet fever.

MALIGNANT SCARLATINA.—In this form of the disease, with inflamed glands, dark-coloured ulcers, extreme debility,

cold extremities, hippocratic countenance, and other marks of a typhoid condition, one or more of the following medicines may be had recourse to :—*Arsen.*, *Mur. Ac.*, *Carbo V.*, *Nitric Ac.*, or *Veratrum*. For the symptoms indicating these remedies, see under their respective names in the chapter on *Typhoid Fever*.

PREVENTIVE TREATMENT.—When Scarlatina prevails in a family or neighbourhood, the administration of a dose of *Belladonna*, night and morning, to children who have not had the disease, will often entirely ward off an attack ; should the disease occur, notwithstanding this treatment, it will, undoubtedly, greatly modify its severity.

ACCESSORY MEANS.—As an invariable rule, the patient should remain in bed ; the room should be well ventilated, at the same time that the patient is protected from direct currents of air. He must not go out too early, as secondary symptoms are of frequent occurrence from neglect of this precaution. His beverage may consist of cold water, gum-water, barley-water, weak lemonade, etc., in small quantities, as frequently as desired. The diet should be simple,—baked apple, toast, gruel, etc., gradually returning, as the disease declines, to food of a more substantial kind. The fever being of short duration, wine or brandy may generally be dispensed with, except in malignant cases, in which two or three ounces of wine, diluted with two-thirds water, may be given in twenty-four hours ; or the wine may be mixed with arrowroot, sago, jellies, etc. The patient should be frequently sponged over with tepid water, and dried as rapidly as possible, to obviate too long exposure. Other measures are often necessary ; *poultices*, frequently renewed, or spongio-piline, squeezed out from hot water, if the glands are swollen ; the *inhalation of the steam of hot water*, as recommended in the chapter on *Quinsy*, as long as the throat *is sore and painful* ; *injections* of tepid water, if the bowels *are costive*.

SECONDARY DISEASES (*Sequelæ*).—If there are no complications or sequelæ, scarlatina may be expected to terminate favourably within a week from the setting in of the disease; but in weakly or scrofulous children the disease is liable to be followed by troublesome or even dangerous maladies, especially if the treatment and nursing have not been skilful and careful. The most frequent sequelæ, with the remedies most likely to do good, are the following:—

Glandular swellings, or discharges from the ears, deafness, require Merc., Calc., or Phos.

Pain in the ear, Puls., Bell.

Croupy cough, Hepar Sulph.

Inflammatory affections of the eyes, Bell., Acon., Sulph.

Anasarca (dropsy), Hell. Apis., Arsen., Digitalis, Terebinth., Sulph.

The last affection is the most common sequel of scarlet fever, and it has been observed to result more frequently from a mild than from a severe form of the disease. This is probably owing to the disease not having expended all its force, so that some of the poison remains in the system; or it may be due to the neglect of proper caution, during the period of recovery; or, again, to the patient having been in a debilitated condition previously to the attack of fever. The *symptoms* of this disease are, puffiness of the eyelids and face, followed by general swelling of the whole body; frequent desire to pass urine, which is scanty, and of a smoky colour, and if tested by heat and nitric acid, is found to deposit *albumen*.

Affections of the kidney or dropsy are infrequent after homœopathic treatment. During convalescence, warm clothing, including flannel, is necessary, and subsequently, a change of air, if possible to the sea-side.

3.—Small-pox (*Variola*).

This, the most marked of the eruptive fevers, is a disease of a highly contagious nature; but less common in this country, and far less disastrous and fatal in its results, than formerly. We may fairly consider the disease as presenting two varieties: *Variola Discreta*, and *Variola Confluens*. In the former, the pustules are comparatively few, and they remain distinct and separate from each other, and may be easily counted. It is the simplest form of the disease, and, except during the first dentition, is rarely fatal. In the latter, the pustules are numerous, and their outline becomes irregular or they run into each other, and form large continuous suppurating surfaces, and it is attended with the greatest danger to life. This division of small-pox is of great importance, as the severity of the disease bears a direct proportion to the amount of the eruption, and danger in the confluent form arises chiefly from the large quantity of pustulation. In determining between these two varieties, we judge from the eruption *on the face*; for if the pustules are confluent there, whether they are so or not on other parts, we class it with the confluent kind. “The danger is always rendered greater, *cæteris paribus*, when the eruption is very full about the head, face, and neck” (*Mason*). There is also a variety in which the pustules partially coalesce, termed *Variola Semi-confluens*.

SYMPTOMS.—In its course, small-pox runs through four stages:—The latent or *incubative period*, which lasts twelve days from the reception of the poison; the *primary* or initiatory *fever* continues about forty-eight hours; the stage of *maturation*, of about nine days’ duration; and of *secondary fever* and decline of the eruption, the period of which varies according to the severity of the disease.

The first stage commences like most other fevers. There

are chilliness, heat, headache, sometimes delirium ; a *thickly-furred white tongue*, a deep flush upon the face, a hard and frequent pulse, a feeling of *bruised pain* all over the body, but especially in the *back and loins* ; more or less pain or *tenderness* at the *pit of the stomach*, and sometimes *vomiting*. When the pain in the *loins* and *vomiting* are very severe and continuous, they may be regarded as the precursors of a severe form of the disease. On the third or fourth day, the *eruption*, often so minute as to escape observation, appears in the form of red spots, or small hard pimples, which feel like shot in the skin. It appears first on the face, neck, and wrists, then on the body, and finally on the lower extremities. If examined, the eruption may be seen upon the palate, and is often formed on the membrane lining the larynx, trachea, and bronchi, giving rise to sore throat, cough, a viscid secretion, and hoarseness. The pimples gradually increase in size until about the eighth day from the commencement of the fever, when the contents, at first watery and transparent, then white and opaque, have become yellowish matter, the pimples having ripened into pustules. The pustules are *depressed in the centre*, and surrounded for a short distance by a rose-red areola. During the time the pustules are filling up, there is swelling of the eyelids and face, sometimes to such a degree as to obliterate the features. A peculiar, disagreeable odour now begins to emanate from the patient, which is so characteristic, that the disease at this stage might be known by this alone. On the first appearance of the eruption, the fever subsides ; but when it is at its height, a fresh attack sets in, which, to distinguish it from the precursory fever, is called the *secondary* fever. In *Variola confluens*, the secondary fever is often very intense, and is the most dangerous period of the disease, owing to the return of the fever when the system had been already greatly exhausted. Severe and even fatal results may arise

from exhaustive suppuration, erysipelatous inflammation, suffocative breathing, and, the most dreaded of all symptoms, a putrescent state of the blood. In about eight days from the first appearance of the eruption, the pustules break, and discharge their contents; scales then form, which dry up, and, in a healthy state of constitution, fall off in the course of four or five days. When this takes place, purplish red stains are left behind, which very slowly fade away, or indelible, depressed scars remain, which are called *pits*. In the latter case, the person so marked is said to be "pitted with the small-pox."

DIAGNOSIS.—An early recognition of this disease, both on account of the patient himself, and for the protection of others, is of great importance. *Severe pain*, evidently not muscular, *in the small of the back*, is the most characteristic symptom. It has been mistaken for *measles*; but the eruption is more perceptible to the touch, and gives the sensation of shot under the skin. From the insidious invasion of *Continued fever*, it is easily recognised by the abruptness and severity of its attack.

DANGERS.—The greatest danger arises from the *secondary fever*, in the confluent form of the disease, about the ninth to the twelfth day, when the pustules are ripening; for then the fever is likely to return, the vital strength having already been much exhausted. In a confluent case, fatal chest symptoms may arise, or there may be ulceration, opacity, and loss of sight. An inflamed condition of the skin between the pustules, instead of the rose-red areola, is a bad sign. Infancy and advanced age are unfavourable periods; beyond sixty years of age, Mr. Marson states, hardly any who take it escape dying. Violent and uncontrollable delirium is often an attendant on the confluent variety, and if it occurs early, in persons who have lived freely or irregularly, is *an unfavourable* symptom. "Draymen, barmen, potmen,

tailors, and the women on the town, are very unfavourable subjects to be attacked with small-pox, owing to their habits of indulging freely, and almost daily, in strong drinks" (*Marson*). Irritability, the patient vexing himself about trifles, sleeplessness, and a plethoric habit, are unfavourable. On the other hand, a quiet, contented, and hopeful state of mind, must be regarded as favourable to recovery.

CAUSE.—Contagion. It is supposed never to occur except from contagion; for large portions of the world have remained for centuries entirely free from it, until it was imported; and then it spread so rapidly, and often so fatally, as almost to depopulate whole countries. "There are some grounds for believing, however, that small-pox, in common with some other diseases, originated in the lower animals, and extended from them to the human species by infection or contagion" (*Aitken*). "There is no contagion so strong and sure as that of small-pox; none that operates at so great a distance" (*Watson*). The period during which the poison is most powerful, is probably when it is most perceived by the sense of smell.

The circumstances which determine the *more severe forms* of this malady, are small, dark, and badly-ventilated dwellings, poor or scanty food, insufficient clothing, want of cleanliness, intoxicating beverages, and other similar adverse influences.

It is worthy of remark, as Dr. Letheby states in his quarterly report on the sanitary condition of London, as to the recent (August, 1863) outbreak of small-pox and increase of scarlatina, that "these sudden outbursts of zymotic disease show that the force of these maladies is not exhausted by sanitary measures, but only kept in check; and that, when occasion serves, as in this instance, by neglect of proper precautions, the force manifests itself in all its original vigour."

TREATMENT.—1. *Primary fever*, Acon., Ant. Tart., Bell., Bry., Veratrum Viride.

2. *Eruptive stage*, Ant. Crud., Ant. Tart.

3. *Suppurative stage*, Merc., Ant. Tart., Sulph.

4. *Desquamation*, cleanliness and tepid sponging.

5. *Confluent and malignant cases*, Ars., Carbo Veg., Stram., Opi., Camph., etc.

6. *To prevent Pitting*, smearing the parts with bacon fat, and protection from air and light.

Aconitum.—This remedy is indicated, during the precursory fever, by shivering, heat, dryness of the skin, rapid pulse, swimming and pain in the head, nausea and vomiting, and pain in the back and loins; it may also be used during any course of the disease, whenever febrile symptoms are prominent. As soon as perspiration sets in this remedy should be discontinued.

Antimonium Tart.—Useful during the eruptive stage, and should be given as soon as this makes its appearance; it is also indicated in the febrile stage, if nausea and vomiting, or convulsions precede the eruption. The spasmodic retching, nausea, and hoarse cough, sometimes very distressing, may often be relieved by this medicine. *Ant. Tart.* is specific to small-pox, in consequence of its power of producing in large doses, in healthy persons, an eruption so closely resembling it as to have been mistaken for it.*

Veratrum Viride.—As soon as the disease is recognised, Dr. Wilkinson recommends the administration of this remedy, to control the fever, and redness and swelling of the parts. He also prescribes it as a lotion. See the *Materia Medica*, article *Veratrum Viride*.

Belladonna.—Delirium, severe headache, ophthalmia. *Bell.*

* A striking illustration of the disease-producing effects of *Ant. Tart.* is recorded by Dr. Baikie in "*The Homœopathic World*" for March, 1866, pages 73-4.

has a direct action upon the brain; it also tends to retain the eruption upon the skin. A dose every second hour, till the symptoms are mitigated. It is frequently indicated after, or in alternation with, *Aconitum*.

Bryonia.—Pain in the loins, tenderness at the pit of the stomach, confined bowels, rheumatic pains, and cough. A sudden disappearance of the eruption, whether from cold or any unknown cause, requires this remedy in alternation with *Aconitum*.

Mercurius.—Ulcerated throat, salivation, and diarrhœa with bloody stools. It is also of great utility during the process of suppuration, and should be given as soon as the spots become opaque.

Rhus Tox.—When the eruptive stage is accompanied with marked prostration, and severe pain in the loins and back.

Sulphur.—During the formation of the pustules, and when there is furious itching of the parts; also when the disease is on the decline. It should be continued till complete recovery takes place.

Coffea. Great restlessness and inability to sleep. A few doses only will be required.

Camphor.—If the eruption *suddenly* disappear from the skin, or *suddenly* assume a malignant type, with symptoms of paralysis of the brain, coldness of the skin, and difficulty of breathing; two or three drops in a little water, every ten or fifteen minutes, for two or three times, or until the skin becomes warm, and the eruption reappears.

Opium.—If, during the progress of the disease, drowsiness, stupor, stertorous breathing supervene, this remedy should be administered.

Carbo Veg.—Malignant small-pox, with a putrid tendency, or other symptoms of a low typhoid variety.

Nit. Acid or *Arsenicum* may be administered under similar circumstances, and when *Carbo Veg*. fails.

ACCESSORY MEANS.—The patient should be kept cool; the sheets and linen be frequently changed, and ample provision made both for the *uninterrupted admission of fresh air*, and the *free escape of tainted air*. A small, ill-ventilated room, overheating, and giving hot cordials, interfere much with the tendency to recovery. During the course of the disease, especially when the skin becomes hot, painful, or irritable, the whole surface may be sponged with warm water, and well dried with a soft towel. This generally affords great relief. In the early stage of the disease, great advantage may also be derived from the *wet pack* (see page 33), followed by a sponge bath. If ulceration on the back or nates is threatened, the patient should be placed on a *water-bed*. When the pustules have burst, powdered starch, or any other dry powder, should be freely applied, to absorb the matter. Cleanliness and frequent tepid washings are especially necessary during the last stage of the disease. An occasional warm bath towards the end of the treatment is also very advantageous. To *prevent pitting*, when the eruption is out, the patient's room should be kept as *dark* as is consistent with its thorough ventilation; as soon as the pustules have discharged, and begun to dry, they should be frequently smeared over with best olive oil, cold cream, or a mixture of one-third of glycerine to two-thirds of water, to prevent permanent scars. Dr. Baikie states, in a letter to the author, when the eruption is thoroughly out, the heat and irritation may be materially alleviated by smearing the whole surface of the body with fresh-cured bacon. A piece is to be boiled with the skin on, and then cut horizontally, so as to leave about a quarter of an inch of fat adhering to the skin; this is to be scored across, and used to anoint the eruption, and may be repeated twice or thrice daily. It completely prevents pitting. Children's hands should be muffled to prevent *scratching*, which might lead to ulceration.

DIET.—Tea and dry toast, bread and milk, sop, gruel, etc.; grapes, roasted apples, strawberries, and wholesome ripe fruits generally. For drink, cold water is generally preferred; in addition, milk and water, raspberry vinegar and water, currant jelly and water, apple water, lemonade, and barley-water.

4.—Vaccination* (*from VACCA, a Cow*).

DEFINITION.—Vaccination is the process by which a specific disease—vaccinia or the cow-pox—is artificially introduced into the human system for the purpose of protecting it against small-pox.

The process of vaccination most fully recognises the homœopathic principle, as it is preventive of small-pox entirely on account of the homœopathic relationship it bears to that disease. Dr. Jenner named the disease *variola vaccinae*, and believed that small-pox and cow-pox were in reality identical. Its tendency is not only to prevent a fatal termination, and render the disease mild in its course, should it occur, but to keep off the disease altogether. The resident surgeon of the Small-pox and Vaccination Hospital at Highgate states, that in the course of his large experience, he found that when small-pox attacked persons who had not been vaccinated it killed 36 per cent. of them—that is, *one in every three died*; but that when vaccination had been performed, the death-rate of those attacked by the disease fell to *one in fifteen*. He also found that the protective power of vaccination was in proportion to the way in which it had been done; thus *one* permanent *cicatrix* (scar) after the operation gives a mortality from the disease of nearly eight in the hundred; *two* scars of rather more than 4 per cent.; *three*

* It is stated that in Sweden, forty years *before* vaccination, out of every million persons, 2,050 died annually; *after* vaccination, 158 only. In Berlin, before vaccination, 3,422; after, 176.

scars less than 2 per cent. ; and if four scars, not one in a hundred die when they catch the disease.* This is a most important practical point to remember: if only one indifferent cicatrix remains after the operation, such persons, taking small-pox in after life, die at the rate of 12 in the 100; but if four or more cicatrices remain, only one in 200 will die of small-pox. Further, Mr. Marson states, of 370 persons treated in the Small-pox and Vaccination Hospital, London, who believed themselves vaccinated, but who had no cicatrix to show, and trusted to such vaccination for their protection, they died of small-pox at the rate of 23½ per cent. Persons, therefore, having no cicatrix remaining, are in a very unsafe condition.

In performing vaccination, the following are the chief points to be observed:—1. The vaccine *lymph* used should be taken from a child free from scrofula, syphilis, or any constitutional *taint*; skin diseases, swollen glands, inflamed or sore eyes, are decided objections, and if disregarded might result in the transmission of disease to previously healthy children. 2. The vaccinator should employ *a clean lancet*; pyæmia, syphilis, and other kinds of blood-contamination, no doubt often follow from the use of a foul lancet. 3. Pure lymph should be taken on the eighth day, *unmixed with blood* or any other secretion. Attention to the above hints will afford ample security against any of the so-called *evils of vaccination*. 4. The matter should be inserted in four places in each arm, it having been found that the protective power of vaccination is in proportion to the number of the resulting *cicatrices*, that being the most efficient which leaves the most and the best cicatrices. 5. When arm-to-arm vaccination cannot be practised, the lymph should be preserved in hermetically sealed capillary tubes. 6. Vaccination should

* See the *Lancet*, August 15th, 1868.

be performed between the third and the sixth months, or earlier if an epidemic of small-pox prevails in the neighbourhood. The third month is perhaps the best, before dentition has commenced. 7. *Treatment* is scarcely ever necessary, as the condition thus set up, described as *small-pox in miniature*, is very simple. Should, however, there be much inflammatory redness and swelling, a few doses of *Aconitum* or *Belladonna* will relieve the patient; while occasionally a poultice is necessary. As the pock is declining, a few doses of *Sulphur* are usually recommended. 8. *Re-vaccination* should take place at the age of puberty; the great changes which occur in the system at this period of life rendering its repetition generally necessary. Persons at this period, especially if they are about to change their place of abode, should be examined, and if they have only one cicatrix, or that is imperfect, or if there is no cicatrix at all, they should be re-vaccinated. "For just upon thirty years we have re-vaccinated all the nurses and servants who had not had small-pox, on their coming to live at the Small-pox Hospital, and not one of them has contracted small-pox during their stay there" (*Marson*).

From the above observations it will be inferred that we think highly of the protection afforded by efficient vaccination. Evils indeed may have arisen from its careless performance; but they only tend to prove that this operation, like every other on the human body, should be performed with care and skill. We fully endorse the following remarks:

"It is thus clearly demonstrated how vaccination has thrown the *ægis* of protection over the world; and how ample, how great, and how efficient that protection may be. It has been shown to diminish mortality generally, and the mortality from small-pox in particular, both in civil and military life, at home and abroad, and just in proportion as it is *efficiently* performed. It has been shown to diminish the epidemic influence; it has been shown to preserve the good looks of the people; it

has been shown that it tends to render small-pox a mild disease compared with the same disease in the unprotected ; it confers an almost absolute security against death from small-pox ; and, lastly, it has been shown to exercise a protecting influence over the health of the community generally" (*Aitken*).

5.—Chicken-pox (*Varicella*).

This is a pustular eruption, similar in its appearance to small-pox, for which it is at first often mistaken. It generally requires little medical assistance, but merely attention to diet, as in inflammatory fever. It differs from small-pox in the slighter degree of fever which attends it, in the pustules becoming filled with a watery fluid about the second or third day, which is never converted into yellow matter, as in small-pox, and in its rapid course. Generally, on the third or fourth day, the pustules dry up, forming crusts or scabs, leaving no permanent scars.

TREATMENT.—If the fever is considerable, give *Aconitum* every four or six hours. When there is much headache, flushing of the face, sore throat, or if the brain is affected, administer two or three doses of *Belladonna*. *Rhus Tox.* will generally be found one of the best remedies in this disease, and under its action will soon disappear. *Pulsatilla*.—This remedy may be selected if there is derangement of the digestive organs.

ACCESSORY MEANS.—Too early exposure to cold, and errors in diet, must be guarded against ; the latter caution is more especially necessary if the digestive organs are at all impaired.

5.—Erysipelas (*S. Anthony's Fire*—*Rose*).

When this disease arises from constitutional causes, it is called *idiopathic* erysipelas, and generally affects the head and neck ; when it follows a wound or external injury, it is called *traumatic* erysipelas, and may occur on any part of *the body which is wounded*.

SYMPTOMS.—Simple or cutaneous erysipelas is known by a spreading redness of the skin, of an inflammatory character, with considerable puffy swelling, tenderness, burning, and a painful sensation of tingling and tension. The colour of the skin varies from a faint-red to a dark-red or purplish colour, becoming white under pressure, but assuming its former colour on the removal of the pressure. An attack is usually ushered in with shivering, languor, headache, nausea, bilious vomiting, and the ordinary symptoms of inflammatory fever, accompanied or followed by inflammation of the part affected.

PHLEGMONOUS ERYSIPELAS is marked by a deeper redness, or it may be redness of a dusky or purple hue, which is scarcely, if at all, removed by pressure; the swelling is greater, and the swollen part is hard and tense; the pain is burning and throbbing, and it occurs generally about the extremities.

DANGERS.—Erysipelas may prove fatal in the following ways:—(1) By *exhaustion*. The constitutional symptoms resemble those of typhoid fever, and the degree of blood-poisoning is great, although the local disease may be limited in extent. (2) By *obstruction to the air-passages*. The inflammation may lead to infiltration of the submucous tissues about the windpipe, the opening into which may be closed, and the patient die suddenly of *apnoea*. The symptoms indicating this condition are impaired respiration, slight lividity of the lips or finger nails, altered tone of voice, or cough, etc. (3) By *coma* from effusion within the cranium. This may arise from extension of the inflammation to the membranes of the brain, or to effusion.

CAUSES.—Debility and loss of resisting power, from disease; the habitual use of stimulants; exposure to cold; impaired digestive organs; *wounds*; badly-ventilated and overcrowded apartments; certain conditions of the atmosphere, and a morbid state of the blood. The tendency of this

disease to attack different parts simultaneously or by *metastasis*—that is, leaving one part and flying to another—furnishes evidence of its origin in a vitiated condition of the blood. The *chief* exciting cause of erysipelas is undoubtedly a recent wound, and the *predisposing* cause is inattention to those hygienic conditions that should surround a patient, combined no doubt with the existence of a personal or family proclivity to the disease. Erysipelas may be considered as one of the penalties inflicted by Nature on those who neglect those prime requisites of health—*cleanliness, temperance, wholesome food, and pure air.*

PROGNOSIS.—The simple or cutaneous variety is attended with much less danger than the phlegmonous. The traumatic form is more dangerous than the idiopathic. It is also more serious when it occurs in an epidemic or endemic form. Mere extent of inflammation is not of so much importance as a high degree of blood-poisoning, combined with a rapid and weak pulse, a dry brown tongue, low muttering delirium, and great prostration. When the disease attacks the head, unless it is controlled by skilful treatment, the membranes of the brain are in danger of being implicated. The disease in any of its forms is most serious at either of the extremes of life. Lastly, the habits and health of the patient, prior to the attack, greatly influence the result.

TREATMENT.—1. *Febrile stage*, Acon., Veratrum Viride.

2. *Non-vesicular*, Bell.

3. *Vesicular*, Rhus Tox.

4. *Phlegmonous*, Ars., Carbo Veg., Nit. Ac., Secale.

5. *Wandering*, Puls., Graph.

6. *During convalescence*, China, and afterwards Sulph.

Aconitum.—General fever, much local inflammation and tenderness. A dose, several times repeated, at intervals of *two or three* hours. *Acon.* is mostly required before the

rash appears, but may be given, if indicated, at any stage of the disease. Hempel recommends the concentrated tincture of the root of *Acon.* as one of the best remedies for either smooth or vesicular erysipelas.

Belladonna.—Violent pressing headache, the brain seeming to be involved; thirst; bright-red skin; constipation; brown-red and thick urine; and when the eruption is *without vesicles*. This medicine may often be advantageously alternated with *Acon.* in the early stages of the disease.

Rhus Tox.—*Vesicular* (having little bladders) erysipelas, whether on the face or any part of the body, with considerable swelling, shining redness of the part, and great restlessness.

Bryonia.—Erysipelas in the neighbourhood of joints, with aggravation of the pain when the parts are moved or touched.

Pulsatilla.—Erysipelas traceable to fat, indigestible food.

Arsenicum.—This remedy is indicated when the erysipelatous inflammation assumes a gangrenous character, and also when there is great general prostration.

Merc., *Cuprum Met.*, *Hepar Sulph.*, *Graph.*, *Canth.*, and *Sulph.* are also remedies required under peculiar conditions; the one last-named is especially useful when the disease has become chronic.

LOCAL MEASURES.—In the local management of erysipelas, the natural functions of the skin are to be promoted, and currents of air, or exposure of the skin to great variations of temperature, guarded against. In mild forms of the disease, no external applications are required, except when fluid exudes, which may be absorbed by dusting powdered starch freely over the surface. But when inflammatory swellings are tense and painful, warm fomentations may be first applied, and afterwards the parts sprinkled over with flour or fine starch, or painted with collodion, if the inflammation is of limited extent, or any other suitable substance, to keep

out the air. If there is much œdema, moderate pressure should be maintained by the application of well-adjusted bandages. If matter forms, incisions are generally necessary to afford openings for its discharge; poultices are then to be applied, and afterwards bandages, to prevent the lodgement of matter.

Dr. Wilkinson recommends lotions of *Veratrum Viride*; he remarks, "The triumph of *Veratrum Viride*, locally applied to pure erysipelas, is as complete as the art of medicine can desire. Diversity of cases of course require corresponding diversity of treatment; yet, from no slight experience, I can declare that *Veratrum Viride* is a cardinal remedy for erysipelas." See the *Materia Medica*.

DIET.—Pure water, gum-water, or barley-water, with lemon-juice, to allay the thirst. If the attack is severe and protracted, good beef-tea, and port wine or brandy should be given, at regular intervals, as required. Subsequently, a change of air, regular habits, and nourishing diet, essential in the after-treatment of all acute diseases, are necessary after a severe attack of erysipelas.

CHAPTER VI.

DISEASES OF THE ORGANS OF BREATHING.

1.—Cold in the Head (*Catarrh, Coryza*).

THIS is a very common complaint, and often the precursor of many serious and fatal diseases. It consists of inflammation of the mucous membrane of some portions of the air-passages. If it affects the mucous membrane of the nose, it is called *coryza*. If the frontal sinuses (the veins of the thick membrane covering the brain), *gravedo*. If the *trachea* (windpipe) and bronchial tubes, *bronchitis*.

SYMPTOMS.—Catarrh usually commences with lassitude, slight shiverings, a feeling of weight in the head, sneezing, watery eyes, and obstruction of one or both nostrils, with a discharge of thin, colourless fluid. These symptoms are often soon followed by a dry cough, hoarseness, sore throat, dryness, tenderness and swelling of the nostrils, pains and soreness of the limbs, general weakness, more or less fever, loss of appetite, a quick pulse, thirst, etc. Under a vigorous condition of the constitution, or as the result of judicious treatment, in two or three days the symptoms just described gradually subside. In neglected cases, the complaint may assume the form of Bronchitis, Pneumonia, Quinsy, Rheumatism, Erysipelas, Toothache, Neuralgia, Inflammatory fever, or even Consumption.

CAUSES.—Exposure to draughts of cold air, wet boots or clothing generally, deficient warmth, or insufficient clothing, when the body is *cooling after having been heated*. It is under the condition described in italics that cold is most prejudicial, namely, not when the body is *hot*, but when it is *cooling*. Exposure to cold is chiefly dangerous when the body has been heated or exhausted by exercise. Under such a condition, the frame is not able to *react*, and hence the application of cold increases the depression. *Partial exposure* to a cold atmosphere, as in a close carriage with the windows open, is more injurious than a general exposure, as in travelling outside a coach; probably because the balance of the circulation is less disturbed, and the lungs are better supplied with oxygen. Wet feet or wet clothes do not ordinarily result in a cold so long as the individual continues in active exercise, and changes his clothes for *warm, dry ones*, avoiding all further exposure, immediately on ceasing from active exercise. But if a person has been exerting himself, perspires, and then gets his feet wet, or is otherwise chilled, and does not continue his exercise, he will be very likely to take a

cold, and to exhibit some of its internal morbid effects. The general recognition of these principles is a matter of great importance in the prevention of diseases, especially those which affect the respiratory organs. It will not, therefore, be inappropriate at the commencement of the chapter which treats of those diseases briefly to consider how external application of cold acts in exciting internal disease.

It is probable, as Dr. Williams states, that external cold excites internal disease, by deranging the circulation and condition of the blood, particularly in the capillaries. Cold checks the secretion (perspiration) of the external surface; it constricts and obstructs the vessels of the skin, and thus throws more blood inwardly, so that internal congestions are produced. These internal congestions impair the functions of the affected organs, and in other ways lay the foundation of disease. This effect of cold takes place more readily and to a greater extent in proportion to the weakness or sluggishness of the capillary circulation. If this be naturally weak, or weak and relaxed from previous excitement, or during fatigue or sleep, there is a liability to take cold. Hence persons are more liable to cold after having been in a hot room, after making exertion, or when asleep. On the other hand, the injurious effects of cold are diminished or prevented by a vigorous state of the capillary circulation, whether that vigour be natural, or artificially excited.

On this view we can understand how chilling influences, such as those resulting from draughts of cold air, damp clothes, or standing on cold stones, acting long on the same part constrict its vessels, check its secretion and nutrition, derange the balance of the circulation, and, by determining a corresponding amount of congestion inwardly, fix it in some part predisposed to disease. Hence the results of cold differ widely in different persons. Exposure to cold or wet ~~may~~ excite a sore throat, a cold in the head or chest, an

inflammation of the lungs, a rheumatism of the limbs, or any other disease to which the individual may be constitutionally predisposed.

It is also probable, as the same writer observes, that the derangement of circulation and of secretion and nutrition produces a corresponding change in the condition of the blood itself; and this change serves to explain why the morbid influence of cold often cannot be removed until some critical discharge takes place, as by perspiration or urine. It is probably by interrupting or modifying the processes of nutrition and disintegration of textures that cold operates in causing rheumatic pains in parts exposed to its influence. Thus the decaying material which, under ordinary warmth, assumes the form of urea, may, by the retarding influences of cold, be changed only into lithic or lactic acid, and immediately exert that irritating influence on the part which causes the rheumatic pain resulting directly from cold.

TREATMENT.—The principal remedies are *Aconitum*, *Arsenicum*, *Mercurius*, and *Pulsatilla*.

***Aconitum*.**—This is a remedy of great power, and undoubtedly surpasses every other in efficacy at the beginning of a cold, or in the precursory stages of all diseases resulting from a cold. If appropriately and early administered it will generally remove all the morbid symptoms consequent on cold, restore health, and so obviate the necessity for any other medicine; a dose every second or third hour. If the cold has resulted in any of the diseases so often following it, *Aconitum* may be alternated with, or substituted by, one of the annexed, or some other remedy, according to the directions given in other parts of this manual.

***Arsenicum*.**—An abundant discharge from the nostrils of thin, hot mucus, which excoriates the parts over which it flows; burning sensations in the nostrils; flow of tears from the eyes; *lassitude and prostration*.

Pulsatilla.—Loss of appetite; impairment of the senses of taste and smell; thick foetid discharge from the nose; heaviness and confusion in the head; aggravation of the symptoms in the evening or in a warm room; sharp pains in the ears and sides of the head, which often change from one place to another.

Mercurius.—Constant sneezing, with soreness of the nose; thick discharge of mucus, profuse perspiration; alternate heat and shivering, sore throat; aggravation of the symptoms toward evening. This remedy is often useful in alternation with *Nux Vomica*.

Dulcamara.—Cold traceable to *getting wet*, or to the chilling or checking of perspiration upon the skin. This medicine, like the former, should be had recourse to on the appearance of the earliest symptoms of catarrh, following exposure to *wet*; it is also recommended when from such exposure it is feared a cold may result.

Antimonium Tart.—The air-passages are loaded with phlegm, rendering breathing difficult.

Bryonia and *Ipecacuanha* may be administered in alternation, should difficulty of breathing be a very marked and persistent symptom; these may be followed by *Arsenicum*, if only slight relief is obtained after two or three doses of each have been given.

Camphor.—This remedy is only suited to the *chill* or cold stage, when its prompt administration, in two-drop doses, every half-hour, repeated several times, will often terminate the disease in the first stage. It should be chosen in preference to *Aconitum* during the chill stage, and especially when the patient has still to be exposed to changes of temperature.

DIET.—As for inflammatory fever, if there is much feverishness; if no fever attend the cold, the usual homœopathic diet. As a rule, light food, and a very sparing use of meat *should be adopted* at the commencement of the attack.

Beer, wine, and spirits are inadmissible, but cold water may be freely taken, especially if thirst is present.

ACCESSORY MEANS.—THE HOT FOOT-BATH.—This form of bath is of easy application, and if the following suggestions are faithfully and early carried out, will often arrest colds and fevers in their incipient stages.

Immediately before retiring to bed, the feet should be put in moderately hot water, the water rising nearly to the knees; the patient should be undressed, but well covered with one or two blankets, which should also cover the foot-bath, so that the steam may have access to the body generally; the temperature of the water should be maintained, *and increased by fresh additions of hot water*, for ten, fifteen, or twenty minutes, or even longer, according to the strength of the patient, *and until perspiration breaks out on the face*. The patient should then get into bed, be well covered with clothes, and free perspiration encouraged by drinking cold water. On rising in the morning he should take a cold plunge, or shower bath, or quickly sponge over the whole surface of the body, and afterwards use vigorous friction with a coarse towel.

Other aids in arresting colds may be mentioned. Breathing almost entirely through the nose is recommended as a means of expediting the cure. The most essential measure to ensure a rapid recovery is to avoid all exposure to atmospheric vicissitudes, until the attack has passed away. This can scarcely be accomplished except by lying in bed, or remaining in a room of unvarying temperature, for two or three days; in all serious cases this course should be adopted.

TO FORTIFY THE BODY AGAINST COLD.—Persons extremely sensitive to cold should consult a homœopathic physician, who will be able to prescribe both hygienic and medicinal measures suitable to individual cases. The two following

measures are, however, strongly recommended for general adoption. 1st.—*Free, daily exposure to the open air.* Familiarity with the atmosphere has a wonderful influence in diminishing the sensibility of the skin, and enabling the body to resist the invasion of cold. What a striking contrast, in this respect, is presented by farmers, shepherds, coachmen, sailors, and others who live much in the open air, as compared with tailors, shopmen, lawyers, women, and others whose occupations are pursued within doors! The sensibility of the former is blunted by habitual exposure, while the latter are liable to danger from every vicissitude of the weather. It may be added, the pure air breathed by the out-door labourer, together with his active life, leads to a most vigorous condition of health, if his labours are not too exhausting or too prolonged, which contrasts most favourably with the condition of one occupied within-doors. 2nd.—*The morning cold bath.* Cold sponging over the entire surface of the body, the plunge-bath, or the shower-bath, is the most certain method we can suggest of protecting the body against injury from exposure to changes of temperature. The cold bath, regularly taken in the morning, inures the surface of the body to a degree of cold greater than it will probably encounter during the remainder of the day, and at the same time it promotes the most vigorous capillary circulation, so essential to the harmonious and healthy working of the system. For hints on the use of the bath, see the first chapter of this manual, pages 29–32.

2.—Influenza (*Catarrhus Epidemicus*).

This is an epidemic catarrh, and is so called from the Italian word, which means “influence,” because it arises from some specific but unknown agent in the air. It is supposed to travel from east to west, spreads most rapidly and extensively, and rarely remains more than from four to six weeks

in one district. It is most severe in low and insalubrious localities, and at the early part of the visitation. In aged persons, and in others whose lungs have been previously diseased, it is a tedious and sometimes fatal complaint. "In the last epidemic (1847) it has been calculated that in London at least 250,000 persons suffered; in Paris between one-fourth and one-half of the population; and in Geneva not less than one-third" (*Peacock*).

SYMPTOMS.—The symptoms differ from those of common cold chiefly in their sudden appearance and rapid extension among a population, their entire disconnection with either a low or a sudden variation of temperature, the great febrile disturbance which prevails, marked general prostration and nervous depression which accompany and follow the disease, and in their protracted duration. There exist chilliness or coldness down the spine, anxiety, feverishness, frontal headache, pains in the limbs and back, severe paroxysms of cough, nausea, loss of appetite, vitiated taste, aching pain and suffusion of the eyes, great sneezing, thin acrid discharge from the nostrils, and extreme prostration of muscular strength. In short, all the symptoms which characterize *gravedo*, *coryza*, and *bronchitis*, respectively, are usually present in *influenza*.

TREATMENT.—*Camphor*, given as directed for "cold in the head;" afterwards, as may be necessary, *Arsen.*, *Merc.*, *Puls.*, *Nux Vom.*, *Bry.*, *Ipec.* For indications, see "Cold in the Head."

Arsenicum is always a prominent remedy.

DIET AND REGIMEN.—Farinaceous food, and if there is great prostration, beef-tea, with *repose in bed* or on a couch. In many cases, confinement in bed is quite necessary for the safety of the patient, and always hastens recovery. The room should be warm, well ventilated, and the patient placed so as to avoid draughts or chills. If there

is much fever present, with loss of appetite, toast-and-water or barley-water, will be suitable. If the cough is very severe, the air of the room should be kept moist by conducting the steam from a boiling kettle into it by means of a tube, or by putting boiling water into flat shallow vessels. When the fever abates, a more generous diet should be allowed. If prostration is the predominant symptom, stimulants, such as wine or brandy, and the essence of beef should be resorted to. After a severe attack, change of air, with walking, or horse exercise, is very desirable. During an epidemic of Influenza, night air is invariably injurious.

3.—Hoarseness (*Raucitas*)—Loss of Voice (*Aphonia*).

These terms indicate degrees of the same affection, and is rather a symptom of some other disease, than a disease *per se*. It is generally the result of an acute or sub-acute inflammatory condition of the mucous membrane lining the larynx and the windpipe, and is a frequent accompaniment of a common cold; also of several other diseases.

SYMPTOMS.—The voice is hoarse and husky, and at times almost or entirely inaudible; there is tickling, dryness, or irritation, and perhaps soreness, in the throat, with a dry short cough.

TREATMENT.—*Recent Hoarseness*, Acon., Bell., Dros., Merc., Phos., Puls., Spong.

Chronic Hoarseness, Hepar Sulph., Carbo. Veg., Caust., Iod., Calc., Sulph.

When hoarseness is an accompaniment of a cold, the cold should first be treated in accordance with instructions contained in the article on that subject. If, however, the hoarseness continue when the other symptoms of cold have disappeared, or if it recur alone, the case should be carefully, *and if practicable*, professionally examined, and remedies

administered. A few of these, with their indications, are annexed.

Belladonna.—Hoarseness, or complete loss of voice ; spasmodic constriction and soreness of the throat, and difficulty of breathing.

Dulcamara.—Hoarseness from exposure to *wet*.

Mercurius.—Hoarseness from a cold, with a thick and profuse discharge from the throat, tickling, burning, swelling, and tendency to ulcerate; also shivering, cough, and a disposition to perspire, with aggravation of the symptoms in the evening, in the cool air, or by speaking and eating.

Drosera.—Hoarseness, with a tickling sensation in the larynx, as from a feather, accompanied with a barking cough, a deep, hollow voice, oppression of the chest, and wheezing breathing.

Pulsatilla.—Loss of voice, with catarrh, impaired smell and taste, loose cough, and much thick, yellow, and offensive discharge from the nose.

Hepar Sulphur.—Chronic hoarseness; also when the voice is weak and the breathing wheezing. It is particularly indicated for hoarseness after the subsidence of acute inflammation of the larynx; also in persons who have taken large doses of *Mercury*.

Carbo Veg.—Like the last, this is a valuable remedy in chronic, obstinate hoarseness, and in old standing diseases of the windpipe and air-passages of catarrhal origin; hoarseness worse in damp cold weather, in the evening and after talking; and for patients who have been drugged with *Mercury*.

Phosphorus.—An invaluable remedy in the chronic form of this affection, when there are dryness and soreness, or tickling of the larynx and chest, and is to be administered in preference to those last mentioned, when there is a tendency to tubercular disease, or even for patients in whose family consumption has been rife.

Sulphur may be selected when other medicines afford only partial relief; when the symptoms are aggravated by damp and cold weather; also as an intercurrent remedy.

ADMINISTRATION.—A dose every three or four hours in the acute form of the disease; twice or thrice daily in the chronic. In the latter case, a remedy should be continued for ten or fourteen days, and, if necessary, after waiting a few days and taking an intercurrent remedy, resumed.

ACCESSORY MEANS.—See the next section.

4.—Clergyman's Sore Throat (*Dysphonia Clericorum*).

In its incipient state, this affection consists of irritation of the lining membrane of the fauces; afterwards of congestion, inflammation, or relaxation of that membrane, enlargement of the tonsils, elongation of the uvula; in its advanced stage, of morbid deposit and ulceration of the mucous follicles.

SYMPTOMS.—The patient first complains of an uneasy sensation in the upper part of the throat; with a frequent disposition to swallow, as if something existed there which that act could remove. If proper treatment be not adopted, the voice soon undergoes a change; it becomes feeble and hoarse, and sometimes, especially towards the evening, there is complete loss of voice. The patient complains of pain in the larynx, and makes frequent efforts to clear the throat of phlegm by coughing and spitting. On looking into the throat, the parts will be found to have an unhealthy appearance, being raw and granular, and the mucous follicles will be seen filled with a yellowish substance; a viscid mucopurulent secretion may be seen adhering to the palate and adjacent parts.

CAUSES.—This condition is probably most often induced by the thoughtless or necessary exercise of the organ of the voice when in an inflamed state. An extension of the affec-

tion is almost certain to result from preaching or reading during an attack of sore throat or hoarseness, as the muscles of the larynx lose their nutrition through extension of the morbid materials from the inflamed mucous membrane. The Clergyman's Sore Throat may also result from an immoderate or irregular exercise of the voice, or it may follow inflammatory disease of the bronchial tubes or lungs, by much exercise of the voice before recovery has taken place.

TREATMENT.—Skilful treatment, if adopted early, is generally quite successful.

Remedies for the incipient and acute stages.—Acon., Bell., Dros., Phos., and Spong.

For the chronic form.—Hepar S., Caust., Bar C., Aurum., Calc., Carbo V., Sulph.

For symptoms, see *Hoarseness*, and the *Materia Medica*.

ACCESSORY AND PREVENTIVE MEANS.—1st. **PERFECT REST.**—The first and most important is to exercise a sore and inflamed organ as little as possible. The treatment of an inflamed larynx, like that of an inflamed joint, should include a state of almost complete rest.

2nd.—**THE WET COMPRESS.** This is an excellent hydropathic application in various affections of the throat, and may be used preventively or remedially, in the following manner:—Wring a piece of linen or flannel out of cold water, and wrap it in two or three thicknesses round the throat; cover the compress with oiled-silk or gutta-percha tissue, and place over this two or three thicknesses of flannel to maintain the warmth, and keep the compress in apposition. If oiled-silk is not procurable, one or two thicknesses of flannel over the compress may be substituted; but flannel is far less effective than the oiled-silk, the object of which is to exclude the air and prevent evaporation of the fluid. When this is applied, the patient should retire to

bed, and he will generally have the satisfaction of finding his throat-difficulty much relieved by the morning. In more obstinate cases, the compress should be re-wetted during the night and also worn in the day-time, re-wetting it as often as necessary. When the compress is discontinued, the throat and chest should be bathed in cold water, followed by vigorous friction with a coarse towel. However often repeated, the wet compress never relaxes the throat.

3rd. CULTIVATION OF THE BEARD.—The beard in the vicinity of the throat should be permitted to grow, as it affords an excellent protection to the delicate organs of the voice, especially in the case of clergymen, public singers, and others subjected to their undue or irregular exercise. After exercising the vocal organs, as in a public address, the skin about the throat becomes relaxed, and on entering the open air the unbroken force of the atmosphere breaks upon these parts, often inducing acute or chronic affections of the throat and bronchial tubes, while the natural respirator—the fine-flowing beard—which our Maker intended to be one of the distinguishing features of the male sex, unshorn, would in many cases effectually protect these important parts. The hair on the human male face, planted there by the goodness and wisdom of our Creator, has its uses, and we may add, its beauties. Let the young man, therefore, never become a slave to the false and pernicious fashion which compels him to shave off his beard, when this natural appendage is found contributory to the health, if not to the improved personal appearance, of those who wear it. See also under *Chronic Bronchitis*.

4th. THE WEEKLY HOLIDAY.—Sunday, the day of rest for the man of business and the day-labourer, is to the earnest and conscientious clergyman a day of great mental and physical expenditure, rendering a thorough holiday on *the Monday* indispensable to healthy and vigorous life. It

should be a rule therefore with every clergyman to make Monday a day of cessation from work, and of out-door recreation.

If these measures were faithfully and perseveringly carried out, the affection known as *Clergyman's Sore Throat*, would soon become obsolete.

5.—Cough (*Tussis*).

Like hoarseness, cough is but a symptom of some more general disease, such as cold, asthma, bronchitis, or consumption. It may indeed be regarded as a conservative act, being an effort of nature to rid itself of a diseased condition, or to throw off morbid products.

To attain this end two things are essential; namely, a certain quantity of atmospheric air beyond the offending material, and a sufficient degree of muscular power to expel it. Hence in croup, or diphtheria, or in the case of a patient on the verge of suffocation from the lodgment of food or other foreign matter in the upper part of the windpipe, the surgical operation of making an artificial opening in the windpipe, below the foreign body, often enables the patient instantly to eject the suffocative body. In aged and feeble persons, suffering from chronic bronchitis with copious secretion from the mucous surface, the muscular power is at last so expended that the phlegm cannot be coughed up, and suffocation ensues.

The accumulation of mucus in the air-passages is, however, by no means the only cause which prompts to the act of coughing. Simple irritation, congestion, an elongated uvula, irritating vapours, pressure upon the respiratory organs, and sometimes even sympathy with other parts; any of these may be sufficient to excite cough.

From this point of view may be inferred the incorrectness of speaking of "curing a cough;" certainly it is not the

cough we desire to cure, but the disease itself for which the cough has been set up.

Cough is often a symptom of some of the most fatal diseases of our climate, and should, therefore, never be disregarded. There are many varieties of cough, but our prescriptions are intended only for common and uncomplicated cases.

TREATMENT.—It may be stated with great confidence that homœopathic medicines are capable of removing every variety of cough not resulting from organic changes, or destruction of the parts implicated. But, to accomplish this result, care, and often a considerable amount of pathological knowledge are necessary.

The following is a selection from the most useful remedies in continued cough ; that is, cough remaining after the other acute symptoms of disease have subsided:—*Acon.*, *Ant. C.*, *Ant. T.*, *Ars.*, *BELL.*, *BRY.*, *CHAM.*, *Caust.*, *Carbo V.*, *Calc.*, *Dulc.*, *DROS.*, *Hepar S.*, *HYOS.*, *Ign.*, *IPEC.*, *Lyc.*, *Merc.*, *Nux.*, *Puls.*, *PHOS.*, *Rhus*, *Sep.*, *Silic.*, *SPONG.*, *Sulph.*, *Ver.* In addition to the following symptoms, see also under *Bronchitis*, *Asthma*, *Croup*, *Pleurisy*, *Consumption*, etc.

Aconitum.—Cough of an *inflammatory character*, especially in patients of a nervous temperament. There exist shiverings, heat and restlessness, thirst, scanty and high-coloured urine, constipation, and the cough is short, hard, and dry.

Belladonna.—Spasmodic, short, dry, and convulsive cough, *worse at night*, in bed ; also for a cough occurring at any time which is sudden and irrepressible, and excited by a sensation of tickling in the throat and chest, and accompanied by flushed face, sore throat, or headache. *Bell.* is generally indicated in the dry, spasmodic cough of children and women, and of stout persons.

Hyoscyamus.—The indications for this remedy are very *similar to those just pointed out*, and it should be had

recourse to if *Belladonna* has only imperfectly succeeded. It is especially adapted to *nocturnal, spasmodic cough*; constant cough on lying down, which passes off on rising; sensation of constriction or burning in the larynx; cough resembling whooping-cough.

Kali Bichron.—This is a valuable remedy when there exist headache, biliary symptoms, constipation, and when the cough strains the stomach.

Ipecacuanha.—Irritating, nervous, and spasmodic cough, attended or followed by *vomiting*. The chest is oppressed by the accumulation of mucus in the air-vessels, rendering breathing difficult, and producing a *smothering* sensation. It is effective in whooping-cough, spasmodic asthma, and when the expectoration is bloody.

Phosphorus.—Dry cough, excited by tickling in the throat, with shooting in the larynx, hoarseness, loss of voice, and pains and soreness, in the chest; the expectoration viscid, *rusty-coloured*, bloody or purulent, with a salt, sweet or sour taste. As it is especially indicated in the coughs of consumptive persons, cases requiring *Phos.* should be under the care of a homœopathic physician.

Hepar Sulphur.—Irritating cough, with hoarseness and smarting in the throat, excited or aggravated by exposure to atmospheric changes.

Chamomilla.—Cough of children during teething and when attended by fretfulness and wheezing breathing; also in cough from suppressed perspiration.

Spongia.—Dry cough, with a burning or choking sensation in the throat; throat-cough, with hoarseness or feeble, husky voice; croupy cough, after the use of *Acon*.

Carbo Vegetabilis.—Cough on taking the least cold; obstinate hoarseness, and loss of voice.

Bryonia.—A hard, dry, catarrhal or inflammatory cough (after *Acon.*), with *stabbing* or *catching* pains in the sides and

chest; headache, as if the *head would burst during the cough*; cough becoming worse by motion, when passing from warm to cold, or from cold to warm. Loose cough, with white or yellow expectoration, sometimes streaked with blood.

Silicia.—Chronic cough in persons who expectorate transparent mucus or pus, and are troubled with an unhealthy condition of the skin, ulcers, etc.

Nux Vomica.—Principally indicated when the cough is due to indigestion, and when occurring in persons of *sedentary habits*, or in individuals addicted to *intoxicating drinks*, strong coffee, and stimulating food.

Sulphur.—Obstinate dry cough, with tightness in the chest, and retching; or loose cough, with expectoration of whitish or yellowish mucus during the day, and dry cough at night, attended with headache and pain in the loins and hips, with spitting of blood. *Sulphur* is also useful as an intercurrent remedy; that is, when the remedy indicated ceases to benefit, *Sulph.* should be substituted for a few days, after which the former remedy may be resumed.

Dose and Administration.—See page 49.

DIET AND ACCESSORY MEANS.—It is a rule of the first importance in the treatment of cough, as in most chronic diseases, that the food should be such as has been uniformly found to agree with the patient. Narcotics, stimulants, spices, strong acids, and all relaxing medicines and drinks should be avoided, as inimical to recovery. Good bread, not less than one day old; beef, mutton (especially the lean parts), and poultry, may be taken in moderate quantities. Puddings of rice, arrowroot, sago, tapioca, etc.; mealy potatoes and other vegetables; ripe and wholesome fruits, etc.; the food may be taken warm or cold, but not too hot.

Gum-water,* barley-water, and other mucilaginous drinks,

* For directions to prepare, refer to Index.

or if preferred, simple cold water in small quantities, at frequent intervals, are highly useful in cough.

A light and airy room, with a good chimney draft, and well ventilated, should be selected. The morning air is generally the best; night, damp, or confined air, and crowded assemblies, are to be avoided.

If, after these directions are strictly carried out, and one or more of the foregoing remedies administered, the cough is not suppressed in a reasonable time, or at least sensibly diminished in its severity, the case should be regarded as too serious and of too complicated a nature any longer to be treated merely by the aid of books, and should at once be placed under the care of a homœopathic physician.

PREVENTIVE MEASURES.—The whole body should be bathed or sponged every day, or at least every second day, with water of such a temperature as is found most agreeable or beneficial. The bathing should be performed rapidly, and the skin quickly dried with a large towel, after which it should be warmly clad. Clothing should be adapted to the varying conditions of the atmosphere. See article, Clothing, page 25-9. Another preventive, also referred to under “Cold in the Head,” is to allow no day to pass without enjoying the pure open air of the country, as far beyond the *boundaries of a town or city* as possible. Familiarity with a free atmosphere will be a security against excessive sensibility to variations of the weather, which is a most prolific exciting cause of cough, as also of general disease.

6.—Hooping-Cough (*Pertussis*).

DEFINITION.—This is paroxysmal cough of an epidemic and contagious nature, consisting of a series of short, spasmodic, forcible expirations, followed by a deep, prolonged inspiration, attended with a peculiar sonorous sound called

the "hoop," "whoop," or "kink," the paroxysms terminating in expectoration or vomiting.

It chiefly affects infancy and childhood, and in delicate or scrofulous constitutions is a distressing malady.

SYMPTOMS.—Hooping-cough is generally preceded by a common cold and cough and by febrile symptoms. After the catarrhal stage has existed from seven to ten days, the cough becomes louder and more prolonged, until it assumes the characteristic convulsive character. The paroxysms are extremely severe, by which the lungs are emptied of air to the last degree, and then a long sonorous inspiration, taken to refill them, constitutes the hoop. The ropy kind of expectoration which follows the cough enables us to distinguish the affection from common cough even before the hoop has been heard. Each paroxysm consists in a number of sudden, violent and short *expiratory* efforts or coughs, which expel so large an amount of air from the lungs that the patient appears on the point of suffocation; these forcible efforts are followed by a deep-drawn *inspiration*, in which a rush of air through the partially-closed glottis, gives rise to the distinctive crowing or hooping noise. This *hooping* is the signal of the patient's safety, for when suffocation does take place, it is before the crowing inspiration has been made. During the paroxysms, the face becomes deeply red or black, and swells; the eyes protrude, and are suffused with tears; and the expression and appearance of the sufferer are such as apparently indicate imminent suffocation. The paroxysm terminates by the expectoration or vomiting of a considerable quantity of glairy, ropy mucus, almost immediately after which the child returns to his amusements, and appears quite well. The attacks recur three or four times a day, or every three or four hours, or oftener; sometimes blood escapes from the nose, mouth, and even *from the ears*, during the fits.

PATHOLOGY.—There is probably at first a peculiar inflammation of the mucous membrane of the bronchi, and as a consequence of this the absorbent glands at the root of the lungs enlarge and then irritate the branches of the *pneumo-gastric nerve* which are situated there.

CAUSE.—An unknown *materies morbi* acting in the body and transmitted by the air. It spreads by infection, and one attack generally protects the system from its recurrence.

COMPLICATIONS.—Hooping-cough may be complicated with smallpox, measles, bronchitis, pneumonia, pericarditis, etc. It is therefore desirable that the chest should be examined occasionally during the disease by *percussion* and *auscultation*, especially in obstinate cases, so that any complications may be early met by appropriate measures.

TREATMENT.—The ordinary course of hooping-cough—six weeks to three months, or much longer—may be greatly abridged, and its intensity moderated, by judiciously selected homœopathic medicines. As it begins in a common cold, the medicines most appropriate to its early treatment are stated under “Cough” and “Cold in the Head;” the prompt use of which will often prevent the development of the disease. In the treatment of this complaint, the general history and symptoms of the patient must be fully considered.

Aconitum.—Dry, hard, or wheezing cough, with fever, dry heat of the skin, scanty, high-coloured urine, and burning pains or tickling in the windpipe, most severe at night. Two or three doses, at intervals of about two hours, will often suffice.

Ipecacuanha.—Convulsive, violent cough, which threatens suffocation, the face becoming blue and turgid; *vomiting* of mucus; sneezing; watery or bloody discharges from the eyes and nose. Useful in the early stage, especially after *Acon.* A dose every two or three hours.

Drosera.—This remedy is indicated in the hooping stage, when the cough is loud and hoarse; the paroxysms recur frequently, and are excessively violent, with very marked, hooping sound, sometimes with hæmorrhage from the mouth and nose; there may be no fever, or it may be intense, with perspiration, vomiting of food, water, or slimy mucus. *Drosera* is generally efficient in epidemic hooping-cough, except in scrofulous children, who require professional treatment.

Veratrum.—Hooping-cough with extreme *weakness*, fever, thirst, *cold perspirations*, blue face, protruding eyes, anxious expression of the countenance, involuntary escape of urine during the cough, and vomiting; also when there are pains in the chest, abdomen, and groin; the patient avoiding exercise.

Arsenicum may follow or be alternated with the last-named medicine, when exhaustion and *debility* are very marked symptoms.

Cuprum.—Violent forms of hooping-cough, when the body becomes rigid, the cough suffocating, and the breath nearly suspended during the paroxysms, which occur frequently, and are followed by vomiting and great prostration. After the cessation of the fit, the patient is but slowly restored to vitality; and during the intervals there is a rattling noise, as if the bronchi were filled with mucus.

Belladonna.—Sudden, violent cough, *worse at night*, with *sore throat*, and determination of blood to the head. In the usual course of hooping-cough, it may advantageously follow *Aconitum*.

Opium.—*Stupor*, irregular breathing, constipation; also in cases in which a remedy, apparently indicated, does not produce the desired results. After a few doses, the former remedy may be selected.

Bryonia and *Phosphorus*, in alternation, every three or

four hours, when the hooping-cough is complicated with *diseases of the chest*, fever, and pain.

Cina.—Hooping-cough with worm symptoms, paleness of the face, picking at the nose, itching at the anus, irregular appetite, a dark semicircle under the eyes, etc. (See the chapter on “Worms.”) *Cina* is often useful in alternation with *Bell*.

Sulphur.—Hooping-cough on the decline, which may be recognised by a change in the phlegm, which then loses its tenacious character and becomes opaque. This remedy may be given thrice daily for a few days, and afterwards continued for a week, morning and night.

Additional Remedies.—Hyos., Lob. Inf., Spong., Phos., Ant. Tart.

DIET AND REGIMEN.—The diet should be light and easy of digestion; all kinds of stimulants avoided, and care taken that the stomach be not overloaded. Indigestible food, or food in too large a quantity, is almost certain to excite a paroxysm. If fever be present, the use of animal food should be restricted. The drink should be toast-and-water, barley-water, gum-water, or linseed-tea. These kinds of drink, varied to meet the patient's taste, will be found grateful and soothing.

During fine, warm weather, the patient should remain in the open air as much as possible; but damp and cold, and exposure to draughts should be strictly avoided. In obstinate cases, and in convalescence, *change of air*, if only for a short distance, proves very beneficial. If possible, mountain or sea air, or pure country air should be chosen, as it acts favourably by removing irritation of the nervous system, and completing the restoration to health. If change of air be not practicable, the shower bath should be used.

It is necessary to treat children with great consideration during the complaint, and to overlook many of their dere-

lictions; as violent emotions of the mind, or fits of anger add to the severity and frequency of the paroxysms. Infants must be constantly watched, taken up as soon as a fit comes on, and placed in a favourable posture.

7.—Bronchitis.

DEFINITION.—Bronchitis is inflammation of the mucous membrane of the air-passages, and is a diffused disease, extending more or less through both lungs, with hoarseness, cough, heat and soreness of the chest, the mucous secretion being at first arrested, but afterwards increased in quantity; it differs from cold or catarrh only in the severity and persistency of the symptoms, and most often occurs in old persons, although it sometimes affects children, when it is called *suffocative catarrh*.

SYMPTOMS.—At first there is fever, with headache, lassitude, and anxiety; a feeling of tightness or constriction about the chest; oppressed, hurried, anxious, laboured breathing, with wheezing, severe cough, and expectoration, at first dry, then viscid and frothy, and sometimes streaked with blood, and subsequently it becomes thick, yellowish, and purulent. The pulse is frequent and often weak; the urine scanty and high-coloured; the tongue foul; there is throbbing pain in the forehead, and aching pain in the eyes, aggravated on coughing, with other symptoms of fever.

If the disease terminates fatally, the skin becomes covered with *cold* perspiration; the cheeks and lips pale and livid; the extremities cold; there is rattling and a sense of suffocation in the throat; the breathing being nearly suspended by the morbid secretion which chokes up the bronchial tubes and their ramifications, which the patient has no longer power to cough up, and at length extreme prostration and complete insensibility end in death. In favourable cases, *however, the disease begins to decline between the fourth*

and eighth day, when the breathing becomes easier, and the expectoration thicker, less frothy and stringy; and the complaint soon entirely disappears, or assumes the chronic form.

MORBID ANATOMY.—On examination of the body after death, we find the trachea, the bronchi, and their divisions and subdivisions, completely blocked up by a frothy, adhesive mucus, resembling that which had been expectorated during life.

CAUSES.—Similar to those of common cold:—exposure to cold draughts of air, to keen and cutting winds, sudden changes of temperature, scanty clothing, or undue exposure of the throat and neck after public speaking and singing. Bronchitis often follows cold in the head.

TREATMENT. *Aconitum.*—Short hard cough from a tickling sensation in the windpipe and chest, troublesome at night and preventing rest and sleep, with rapid and full pulse, hot skin, frontal headache, palpitation of the heart, dizziness, constipation, and other febrile symptoms. This remedy is generally required about every third hour at the commencement of an attack, and often during its progress if febrile symptoms recur. Its utility is generally indicated by the cough becoming loose, the breathing easier, and the skin moist, when the remedy may be given less frequently, or discontinued.

Antimonium Tart.—Severe paroxysms of loose cough, with suffocative, wheezing respiration, palpitation of the heart, pain in the loins and back, headache, thirst, etc. A dose every third or fourth hour.

Bryonia.—A dry hard cough with a *stitching pain in the chest, aggravated by movement*, headache as if it would burst during coughing; violent morning cough, with *copious expectoration* of thick or yellow mucus, sometimes streaked with blood; cough with retching or vomiting; cough with oppressed painful breathing. In advanced stages of Bron-

chitis, this remedy will often be found valuable in alternation with *Phosphorus*. *Bryonia* is also useful in the acute attacks of children with suffocative cough, rapid, difficult, or sighing breathing, great agitation and anxiety.

Spongia.—Dry, spasmodic cough, without expectoration, or only a little frothy mucus; oppressed breathing, or inability to breathe unless the head is thrown backwards; hoarseness, or husky feeble voice; heat and burning in the chest, and tearing pain in the region of the throat.

Hepar Sulphur.—A wheezing sound of the voice; oppressed breathing; irritation in the throat, with violent spasmodic cough. It is especially serviceable in chronic cases.

Mercurius.—The indications for this remedy are, in addition to the ordinary symptoms of bronchitis, abundant loose, sometimes foetid, perspirations; offensive breath; acrid discharge from the air-passages, or increased flow of saliva.

Arsenicum.—Cough, with difficult expectoration of tenacious or saltish mucus stained with blood; sensation of burning heat in the chest; a suffocative sensation on going up-stairs or on lying down; anxious, painful, laboured breathing; or when the lungs no longer permit the free entrance of oxygen into the air-tubes, and thus are incapable of expelling the morbid secretions. *Ars.* is well indicated in aged or feeble persons.

ADDITIONAL REMEDIES.—*Ammon. Carb.*, *Dros.*, *Ipec.*, *Samb.*, *Phos.*, *Stannum*, *Rhus.*, and *Sulph.*

In making our selection from these medicines regard should not only be had to the actual symptoms present, but to the temperament, hereditary predisposition, and the remote cause of the malady. For example, if, in any given case, the indications actually present point equally to *Hepar Sulph.*, and *Rhus.*, but the attack was found to be connected with a repelled eruption, our choice would evidently rest

upon the former medicine; while if the disease was found to be dependent upon an arthritic habit, *Rhus* would be the appropriate remedy (*Marcy*). The principle embodied in these remarks applies with equal force to the treatment of any other disease.

DIET.—In bronchitis the diet should be light and liquid, including gum-water, barley-water, gruel, jelly, beef-tea, etc. Throughout the disease the air of the patient's apartment should be maintained at a temperature of about 65 to 70° Fahr., and it should be kept *moist* by the evaporation of hot water from shallow dishes near the bed, as directed in the section on *Quinsey*. Congestion of the lungs may be relieved by covering the chest with large hot linseed-meal poultices. If there is great prostration, nutritious liquid diet and stimulants are necessary; if they cannot be taken by the mouth, they should be administered in the form of enemata.

PREVENTIVE.—Susceptible patients may sometimes ward off an attack by wearing a good respirator whenever exposed to night air, or during inclement weather; or in the case of males, the cultivation of the beard. See the next section.

8.—Chronic Bronchitis (*Catarrhus Senilis*).

This somewhat different form of bronchitis is very common in advanced life. The milder forms are indicated only by habitual cough, shortness of breath, and copious expectoration. Many cases of winter cough in old people are examples of bronchial inflammation of a low, protracted character. It is often insidious in its approach, although it sometimes succeeds to acute bronchitis, when that disease has been neglected or has not been properly treated.

TREATMENT.—The following are valuable remedies and may be selected according to the cause of the disease and

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are encircled by minute bands of muscular structure, which like other muscular fibres are liable to be affected with spasms, as is proved by the phenomena presented in this disease. These spasms constrict the air-tubes, and the difficulty of breathing and the wheezing respiration are caused by the air being forced through these contracted channels. The spasmodic character of this disease is further proved by the fact that post-mortem examinations of the lungs of some asthmatic patients have been made without presenting scarcely any traces of disease, either in the lungs or heart, except that the air-cells are dilated, and the entire lungs are puffy and anæmic. The attacks are often periodic and sudden, and are attended with distressing anxiety.

SYMPTOMS.—A fit of asthma generally occurs in the night, particularly from midnight to early morning, the patient waking suddenly with a sense of suffocation, springing up in bed, and assuming various postures, or even rushing to the opened window, where he remains leaning forward on his arms, employing the assisting muscles of inspiration, and wheezing loudly, from great obstruction to the entrance and exit of air into and out of the lungs, labours for breath like one struggling for life. The countenance bears evidence of great distress, the eyes protrude, the skin is cold and clammy, the pulse small and feeble, the perspiration stands in large drops on his forehead, or runs down on the face, and he often looks imploringly, sometimes impatiently, at his medical attendant for relief from his misery. At length, after an uncertain time, one to three hours, or longer, there comes a remission; cough ensues, and with it expectoration of mucus, and soon the paroxysm ceases, permitting the sufferer to fall into the long-desired slumber.

The patient probably retired somewhat ill or uncomfortable on the previous evening, and woke at one or two o'clock with a feeling of constriction and inability to expand the

lungs freely. An attack is unattended with fever, and is generally preceded by disturbance of the digestive organs.

PHYSICAL SIGNS.—On *percussion* during a fit the chest is resonant, showing that the lungs are distended with air; but on applying the stethoscope little or no respiratory sound is heard, as if the air were imprisoned or in a state of stagnation in the air-cells; and it is probable there is a spasmodic contraction of the muscular fibres at the base of the trachea which stops the respiratory murmur.

DIAGNOSIS.—The physical conditions of the chest just pointed out, the abruptness and violence of the symptoms, and the comparative good health enjoyed between the attacks, are sufficient to distinguish the disease.

CAUSES.—Irritation of the centre of respiration and of the nerves concerned in the respiratory act. This irritation may result from deranged digestion, in consequence of the intimate nervous connection existing between the digestive and the respiratory organs; or it may be produced by hygrometric changes of the atmosphere; or, again, by the introduction of some poisonous but subtle material floating in the atmosphere, and brought by inspiration into contact with the respiratory surface, such as the minute particles, or the mere odour, which passes off from powdered ipecacuanha or hay; or the vapour of sulphur. Excessive exertion and mental emotion often bring on a paroxysm. After it has once occurred, asthma is easily reproduced by indigestion, especially after *heavy suppers*; a frequent repetition of the fits leads to the dilated state of the air-passages and air-cells of the lungs, the dilation of the right cavities of the heart, and the general displacement of that organ which uniformly exist in persons who have *long* suffered from this disease. The disease may also be hereditary, it being one of those maladies, a disposition to which is transmitted from parents *to children*.

TREATMENT.—*Ipecacuanha*.—One of the first and chief remedies to be used; especially if there is a feeling of tightness about the chest, panting and rattling in the windpipe, which feels as if full of phlegm; coldness, paleness, anxiety, and sickness. A dose every ten or fifteen minutes during an attack; afterwards every three or four hours.

Arsenicum.—Short, anxious, and wheezing breathing; aggravation of the sufferings at night by lying down, and upon the least movement; attacks of suffocation, spasmodic constriction of the chest, with pale or bluish face. It is especially useful in chronic asthma, and when the disease occurs in old persons, or in feeble and impoverished constitutions; and is attended with burning heat of the chest, cold sweats, and general debility; also in bad cases occurring after suppression of an eruption or catarrh.

Bryonia.—Obstructed respiration, aggravated by exercise or by talking; tightness and oppression at the chest and abdomen during inspiration; inclination to vomit, the patient being fretful and irritable.

Nux Vomica.—Suitable for strong, robust persons; to attacks occurring about three or four o'clock in the morning, or after a heavy meal; when the disease has been induced by prolonged study, sedentary habits, or alcoholic beverages. It is more particularly indicated when heartburn, flatulence, or costiveness have preceded the paroxysm.

Belladonna.—Paroxysms of short, difficult, irregular, and suffocating breathing, accompanied by dry cough, severe beatings of the heart, vertigo, and headache.

Ant. Tart.—Oppression, with profuse secretion of mucus low down in the chest, suffocative cough, palpitation of the heart, retching, especially in children and aged people, and when the paroxysm occurs in the evening.

Veratrum.—Violent paroxysms of spasmodic asthma, with great prostration, coldness of the nose, ears, and feet, and cold perspirations.

Lobelia Inflata.—Spasmodic asthma occasioned by a humid state of the atmosphere, with a constrictive, suffocative sensation, wheezing breathing, vomiting, prostration, giddiness, spasmodic cough, intermittent pulse, cold sweats, and pains in the abdomen.

Sulphur.—Chronic asthma apparently connected with some constitutional taint; also after other medicines have been unsuccessful.

Additional Remedies.—Calc., Cann. Ind., Digit., Samb., Stram., Spong., China, Puls., Phos., and Carbo V.

ACCESSORY MEANS.—Persons who are predisposed to asthma should strictly avoid all its exciting causes, more especially wet feet, damp clothes, sudden changes of temperature, indigestible food, and heavy suppers. The homœopathic diet should be adhered to, for, as may be inferred from what is stated under *Causes*, the slightest disorder of the stomach might occasion an attack. Pastry, high-seasoned dishes, and too great a variety of articles, or too great a quantity at one meal, coffee, and heating beverages, should be avoided. “More is to be done for asthmatic patients on the side of the stomach than in any other direction.” In many cases the diet should be weighed, the hours of meals fixed, and adhered to most rigidly.

During a fit, striking relief may often be obtained by putting the feet and hands into hot water. Smoking Stramonium at the commencement of a fit, is said to remove it like a charm in some; in others, however, it fails altogether. Smoking tobacco is often useful in relaxing the spasm; a few whiffs are usually sufficient. Tobacco should never be indulged in by the asthmatic patient, except during a paroxysm, for then only will it be of any advantage. Relief is often obtained by the fumes of burning nitre, which is effected by placing some pieces of blotting-paper, *previously* saturated in a solution of the nitrate of potash,

about the size of the hand, on a plate; one of these pieces being ignited, the fumes are diffused throughout the room, and their influence is soon made evident. At the same time, the windows should be thrown wide open to admit the air. The best means, however, to fortify the body against this malady is the *shower bath*; the sudden application of the water improves the tone of the whole system, and renders the body less sensitive to atmospheric changes.

10.—Asthma of Children (*Asthma Millari*).

The attack generally comes on with great suddenness, and generally at night on waking from sleep, or after a fright, and sometimes without any apparent cause. The spasms set in with wheezing and great difficulty of breathing; the child gasps for breath, the face turns pale or blue, there are frequent clenching of the thumbs, spasmodic contraction of the toes, or convulsions. This disease is often mistaken for croup, but is distinguishable from it by the absence of fever, by the spasmodic character of the attacks, and by the absence of any previous symptoms of a common cold. It usually occurs in delicate, strumous children, and is often fatal if homœopathic medicines are not promptly used.

Sambucus.—Extreme dyspnœa, almost amounting to suffocation; suffocative paroxysms after twelve o'clock at night. A dose every fifteen to thirty minutes during an attack.

Ipecacuanha and *Arsenicum* are also useful remedies, and may be administered if the foregoing does not fully succeed. (See the preceding article.)

11.—Inflammation of the Pleura (*Pleurisy, Pleuritis*).

The disease to which the above terms are applied consists of acute inflammation of the pleura, or serous membrane which invests the lungs and lines the thoracic cavity. In health, this membrane has a smooth, lubricated surface, to

permit the free motion of the viscera they enclose; inflammation destroys this polished surface, so that movement of the membranes, or of the lungs, is rendered difficult and painful.

SYMPTOMS.—The disease comes on suddenly and violently, with rigors, fever, and *lancinating, stabbing pains*, often called “a stitch in the side,” commonly felt below the nipple, and usually affecting only one side; the pains are acutely increased by coughing, by pressure, or by the least attempt at a deeper inspiration, which the patient soon refuses to take. There is tenderness at the intercostal spaces, and the breathing is diaphragmatic, the movements of the ribs being restrained, and the lungs only partially filled with air. There are also short, frequent, dry cough, parched tongue, flushed face, hard, wiry, quick pulse (about 100 in the minute), scanty and high-coloured urine, and the patient constantly desires to lie on the affected side, or on the back. Should the lung also be involved, the expectoration will be very copious, and streaked with blood.

The inflammation, however, soon terminates in *resolution*, and the two surfaces of the pleura regain their smooth, moist character; or the roughened and inflamed surfaces become more or less *adherent*; or *effusion* takes place, and a dropsical fluid separates the surfaces, a condition known as *Hydrothorax*. In severe cases, the effusion may be so excessive as to compress the lungs and heart, and to suspend their functions. Sometimes there is a large collection of true pus, which fills the pleuritic cavity, when it is termed *Empyema*. This condition is likely to arise in bad constitutions, and also when the inflammation has resulted from injury, and the presence of foreign matter in the cavity. The quantity of effusion may be estimated by the dyspnoea with which the patient suffers, and will be greater in proportion as the lung is more completely compressed.

PHYSICAL SIGNS.—On applying the stethoscope to the affected part of the chest at this period, the dry inflamed surfaces may be heard rubbing against each other, and producing what is called a *friction sound*; this rubbing may also be *felt* by placing the hand on the corresponding part of the chest; it is probably due to the pleura being preternaturally dry by exhalation, or to its being roughened by effusion of fibrine. This sound is only to be heard for a short time, because the opposite surfaces become glued together, or, more probably, separated by serous effusion; in this there is dullness on *percussion* at the lower part of the chest as high as the level of the fluid. To the same extent, the respiratory murmur is also lost. *Ægophony* (a shrill, vibratory sound of the voice) may also be heard there. At the same time the patient, though at first he preferred to lie on the sound side, is compelled to turn to that which is affected, so that the movements of the healthy lung may not be impeded by the superincumbent weight of the dropsical pleura.

CAUSES.—Exposure to atmospheric vicissitudes, and sudden checking of the perspiration, are the most frequent causes, especially in persons of unhealthy constitutions; surgical operations and mechanical injuries are frequently exciting causes; thus the rough ends of a fractured rib may set up inflammation of the pleura. It may also be excited by extension of other diseases. The cause of the disease may materially alter the treatment.

TREATMENT.—*Acon.*, *Arn.*, *Bry.*, *Ant. T.*, *Phos.*, *Ars.*, and *Rhus Tox.*

Aconitum.—This is appropriate in the early and inflammatory state of the disease. After administering two or three doses, its beneficial effects are often marked by the occurrence of abundant perspiration, which contrasts most favourably with the hot, dry skin, urgent thirst, quick pulse, and general suspension of the secretory functions which existed before the exhibition of the remedy.

Bryonia.—This is a remedy of great power in pleurisy, even in its most violent forms. Its special indications are, laboured, short, anxious, and rapid respirations, performed almost entirely by the abdominal muscles; stinging, shooting, or burning pains in the side, aggravated by breathing or movement; painful, dry cough, or cough with expectoration of glairy sputa; weariness, disposition to retain the recumbent position; irritability, restlessness, etc. A dose every one to three hours, alone, or in alternation with *Aconitum*, until the pain and difficulty of breathing are removed.

Phosphorus.—Pains in the chest of a severe, sticking character, excited or increased by breathing or coughing; the breathing is short, the cough dry, the expectoration, owing to a small quantity of blood mixing with it, is of a rusty colour, and there is rapid prostration of strength. This remedy may be given alone, or in alternation with any other indicated by the symptoms.

Antimonium Tart.—Cough with rattling of mucus, oppressed breathing, sometimes nausea, profuse expectoration, violent throbbings of the heart, and a feeling of suffocation.

Arnica.—Pleurisy supervening upon long-continued and laborious exercise, or from external injury; especially when pain and soreness remain, or when much fluid has been effused; in the latter case, *Arn.* tends to promote its absorption.

Belladonna.—Congestion of blood to the brain, red face, delirium, or typhoid symptoms. It is generally required in alternation with *Aconitum*, at short intervals.

Arsenicum.—Tedious cases, with *extreme prostration* of strength, painfully oppressed breathing, occasional attacks of suffocation, *coldness of the body*, low delirium, and general exhaustion.

Sulphur.—When the lancinating pains in the chest have yielded to *Bryonia*, or any other remedy, a dose of *Sulphur*

every six or twelve hours, for several days, will often complete the cure. It is also advantageous as an intercurrent remedy when recovery proceeds very slowly, and when the breath and expectoration have a foetid character.

GENERAL TREATMENT.—Diet, as in “Inflammatory Fever,” pages 55-6. Applications of heat, in the form of poultices, flannel wrung out of hot water, etc., applied to the painful part, will often afford striking and immediate relief. Bleeding in every form should be avoided.

12.—False Pleurisy (*Pleurodynia*).

This affection is often mistaken for pleurisy, but with a little care may be readily distinguished from it. It is of a rheumatic character, and chiefly affects the intercostal muscles. The patient complains of aching and stitching pains in the chest, which are aggravated by ascending stairs, or other kinds of exertion. The cough is slighter than in pleurisy, the pain is increased only by hard pressure, and there is little or no fever, or other constitutional disturbance.

TREATMENT.—*Arnica*.—A few doses, at intervals of three or four hours, will generally effect a cure.

Bryonia.—If the pain is sharp, cutting, and increased by breathing, also if the patient is feverish and restless. A dose every third or fourth hour.

ACCESSORY MEANS.—Warm applications, as recommended in the last section, generally afford relief. A liniment, medicated with *Arnica* or *Bryonia*, well rubbed into the affected part, will aid the internal use of these remedies in removing the disease.

13.—Inflammation of the Lungs (*Pneumonia*).

This disease consists of acute inflammation of the substance of the lungs, in contra-distinction to that which affects the air-tubes which ramify these organs, and called bronchitis.

Pneumonia may affect one or both lungs; or, in medical language, may be double or single. In two cases out of three, the right lung is the one diseased; and in about one case out of eight the inflammation extends to both lungs. The lower, posterior part, and base of the lungs, are the portions that are most often affected.

It frequently exists with pleurisy, when, if pneumonia forms the chief disease, the double affection is called *pleuro-pneumonia*. If, however, pleurisy predominates, it has been termed *pneumo-pleuritis*.

SYMPTOMS.—Pneumonia generally comes on insidiously, with restlessness and febrile disturbance, and sometimes has made great progress before the true character of the disease has been discovered. There is deep-seated, dull pain, referred to the scapulæ, or felt as an oppression under the sternum; but there is a great feeling of illness, and frequent, short cough, with expectoration of a viscid matter, of a green, yellow, or pale colour, sometimes tinged with blood, which form such tenacious masses, that inversion of the vessel containing them, will not detach them. The breathing is rapid and difficult; the skin hot, especially in the regions of the ribs and armpits; there exist great thirst; interrupted, hesitating speech; the pulse is variable, being sometimes rapid and full, at other times hard and wiry, or quick and weak; the urine is scanty, red, and sometimes scalding; and the patient lies either on the affected side or on his back. If the disease is unchecked the face often exhibits patches of redness and lividity; the blood-vessels of the neck become swollen and turgid; the pulse weak, irregular, or thready; and the patient may sink, either from exhaustion, or from obstruction of the lungs.

PHYSICAL SIGNS.—On percussing the chest of a person in health, a hollow resonant sound is returned, proving the *presence of air*. If we also apply a stethoscope to the chest,

we may hear, as the patient breathes certain sounds, produced by the air entering the air-cells, which are described as the "*vesicular murmur*," and have been compared to the breeze among the leaves or the cooing of doves. In pneumonia these sounds become changed; instead of resonance there is dulness on percussion; and, in the first stage, by auscultation, *minute crepitation* may be heard, which has been compared to the sound produced by the rubbing a lock of hair between the finger and thumb close to the ear. In the next stage, the sound just described cannot be heard, for as the inflammation proceeds, the soft and spongy character of the lung is lost, and it becomes consolidated by effusion and organization of fibrine in the air cells, and resembles the cut surface of the liver; this condition is called *Hepatisation*. *Percussion* elicits great dulness over the whole of the affected part. During convalescence, as the air cells open, *minute crepitation* may be again heard, and afterwards the natural vesicular murmur.

In the next, or third stage, purulent infiltration occurs, which consists of diffused suppuration of the lung tissue. In rare cases, a circumscribed abscess forms, and on applying the ear to that part of the chest, a gurgling sound may be heard; this condition is usually preceded by rigors; and a hollow or cavernous sound follows when the abscess has been emptied by coughing and expectoration. The occurrence of copious expectoration of whitish or yellowish mucus, general perspiration, a sudden abundant discharge of urine, with copious sediment, diarrhoea or even bleeding of the nose, may be regarded as forming a crisis, encouraging the hope of a favourable termination.

Occasionally, in old or enfeebled constitutions, *gangrene* of a portion of the lung may occur.—This condition is easily recognised by a most intolerable odour of the patient's breath, resembling that proceeding from mortification of the

external parts. Unless the gangrenous portion is extremely limited, the case is almost certain to terminate fatally.

TREATMENT.—*Inflammatory symptoms*, Acon., Bry.

Bloody sputa, weak pulse, etc., Phos., Rhus Tox.

To loosen the tenacious phlegm, Ant. Tart.

Complicated with pleurisy, Bry. and Phos., especially after the use of Acon.

Spasmodic cough, worse at night, Hyos., Bell.

From violence, or with hæmoptysis, Arn.

Persons addicted to alcohol, Nux or Opi.

Old, feeble, scrofulous patients, Ars., Verat.

With threatened gangrene, Arsen., Carbo V.

With cerebral symptoms, Bell., Hyos., or Opi.

For the symptomatic indications, see under *Pleurisy*, the treatment in each case being very similar.

ACCESSORY MEANS.—A large, thick linseed-meal poultice, or *spongio-piline*, to fit the chest in front and back. The patient must be kept very quiet, have mucilaginous drinks and farinaceous diet, and be treated generally as directed under *Typhoid Fever*, pages 67-76.

14.—Croup (*Cynanche Trachealis*).

Croup is a disease almost peculiar to childhood, most cases of it occurring during the second year of life. There are two forms of it which can easily be distinguished, the *spasmodic* and the *inflammatory*.

SPASMODIC CROUP (*Laryngismus stridulus*) occurs at the youngest age, before the end of the first dentition.

SYMPTOMS.—It comes on suddenly, usually in the night, with a spasm of the muscles of the throat, so that the child struggles to get its breath, with a choking noise, and becomes livid in the lips. It usually occurs during dentition, or irritation in the stomach or bowels. Under proper treat-

ment the attack usually soon passes off, although it may be premonitory of disease of the brain.

TREATMENT.—*Acon.*, *Spong.*, *Bell.*, *Cup.*, *Ipec.* For the symptomatic indications, see further on.

INFLAMMATORY CROUP (*Cynanche Trachealis*) is less frequent, and often occurs after the primary dentition to near puberty. It is one of the most dangerous diseases of children, and under the treatment of the old school practitioner, is most formidable and fatal in its results, the mortality being formerly *four* out of *five*, and at present probably at the least *one-half* the children attacked die. Under skilful Homœopathic treatment, however, especially if commenced early, the disease is curable. We possess prompt, efficient, and specific remedies which arrest the inflammatory process, and so save the life of the patient. The records of Homœopathic treatment show a large balance in its favour as contrasted with the old system, in all acute as well as chronic maladies.

SYMPTOMS.—It is a peculiar inflammation of the mucus membrane of the *larynx* and *trachea*, the vessels of which exude a fibrinous or albuminous material, which concretes and forms a false membrane. It usually begins as a catarrh, the first indication being *hoarseness* in the voice or cry of the patient, with a peculiar barking cough, or sore throat, and after one or two days or even without any premonitory indisposition, usually at night, the symptoms become aggravated, the sleep being interrupted by paroxysms of *hoarse* coughing, the child throwing its head back to put the windpipe on the stretch. A metallic ringing sound is heard in the inspiration and in the cough, which has been compared to the crowing of a young cock, or to the barking of a puppy; and although the respiratory efforts are great, it is evident, from the turgescence of the face and neck, and the carrying of the child's hands to its throat, that an insufficient

quantity of air enters the lungs. After the fit has continued for a variable time, from a few minutes to an hour or more, there is an interval of relief usually of several hours duration. The pulse is frequent and wiry, with loss of appetite, thirst, and great distress.

As stated above, croup is not always preceded by the symptoms of catarrh, but may appear suddenly. In the course of the night, a child may go to bed apparently well, and have an attack of the complaint in the worst form. It is, probable, however, in these sudden attacks of croup, that the subjects of them had been exposed to cold or damp on the previous day, although no symptoms of catarrh were noticed. Whether the symptoms occur thus suddenly or after the precursory indications of a cold, the disease almost always comes on *in the night*, with remissions towards morning.

DANGERS.—The attack may prove fatal in two to four days, from exhaustion, suffocation, convulsions, or the formation of a coagula in the heart. If the local symptoms are very severe, and the paroxysms recur frequently, the prognosis is unfavourable. The tendency to death is by *apnœa* (privation of air), the false membrane contracting the naturally narrow passage for air at this part. As the fatal termination approaches, the breathing becomes so greatly impeded that the blood is but slightly oxygenated; the lips and cheeks become livid, cold, and covered with clammy sweats; the eyes red and sunken; the entire organism prostrated, and, unless speedily relieved, the child expires in a state of suffocation; or coma and convulsions ensue, and end the struggle.

CAUSES.—The predisposing cause of croup may undoubtedly be explained by the anatomical fact that the trachea and its orifice are very small in infants, and do not enlarge *in proportion to other parts of the body* till after the third

year; after this period, the calibre of the trachea enlarges rapidly, and the liability to croup diminishes in proportion. The exciting causes are cold, dark, damp, and unhealthy localities; sudden changes of temperature, wet feet, poor or scanty food, especially the adoption of improper diet when a child is weaned; insufficient clothing, or previous illness. One attack acts as a strong predisposing cause to subsequent ones. Like most diseases of the respiratory organs, it is most fatal in the winter and spring. *Low* and *moist* districts are the most favorite localities of croup. Towns situated near the banks of rivers have an extra share of it; and it has been noticed to prevail especially in such places, among the children of washerwomen, clearly showing the relationship of cause and effect. Dr. Alison observed it often occasioned by children sitting or sleeping in a room *newly washed*, and that he noticed its frequent occurrence on a Saturday night, the only day in the week it was customary for the lower classes in Edinburgh to wash their houses.

TREATMENT.—*Acon.*, *Spong.*, *Bell.*, *Iod.*, *Hepar Sulph.*, *Sambucus*, *Bromine*, etc.

Until a homœopathic practitioner arrives, proceed promptly with one or more of the following remedies, according to the symptoms that are present.

Aconitum.—In very urgent cases, this medicine should be administered every fifteen minutes, and in less urgent cases every one or two hours, if there exist *great heat*, and *dryness of the skin*, thirst, short dry cough, and difficult breathing. *Acon.* is often of priceless value in the early stage of the disease. Warm and gentle perspiration following this medicine is a favourable symptom, and especially if the child falls asleep, which should on no account be prevented. On waking, the patient should have *Hepar Sulph.*; a dose repeated every four or six hours, for two days, and afterwards, at longer intervals, for a week. In favourable cases,

and if the accessory means are strictly carried out, this treatment may suffice.

Spongia.—If *Acon.* produces perspiration, but exerts no favourable change in the breathing, *Spong.* should be substituted. This remedy is particularly indicated if the breathing is laboured, loud, and wheezing, and the cough hoarse, hollow, barking, or whistling, and present day and night, but worse towards evening, the patient looking anxious, pale, and as if he would suffocate.

Hepar Sulphur.—Loose cough, with the ringing or brassy sound peculiar to croup, with a constant rattling in the respiratory organs, during which the patient tries in vain to get relief by expectoration. If administered early, this remedy is often sufficient to arrest the disease.

Iodine.—An excellent remedy, especially in scrofulous children, in almost all stages of croup, and often successful when other remedies fail.

Bromine.—If the symptoms get worse, notwithstanding the use of the foregoing remedies, this should be administered every ten or fifteen minutes. The chief indications for *Bromine* are, small and quickened pulse; formation of a false membrane; suffocative spasm in the larynx; anxious, wheezing, painful breathing, the patient gasping for air; the cough has a croupy sound, and is hoarse and fatiguing. Should great weakness be superadded to the above symptoms, or if the patient has been prostrated by harsh treatment, *Phosphorus* may also be given, and an alternate dose administered every ten or fifteen minutes, till improvement ensues, when the medicines may be given less frequently.

REMEDIES DURING RECOVERY.—If hoarseness remains, *Carbo Veg.* should be had recourse to. If cough and soreness exist, *Phosphorus*. If the patient remains weak, it will generally yield to *China*.

Administration.—In very severe cases, every fifteen or

thirty minutes; in less severe cases, or as improvement ensues, every one, two, three or four hours; during recovery, thrice daily.

DIET AND REGIMEN.—During the attack, water is almost the only article admissible, and may be given in small quantities when thirst exists. During recovery, milk and water, arrowroot, gruel, etc. In the case of delicate children, or if great weakness suddenly occurs during any course of the disease, it may be necessary to support the patient by the essence of beef, and wine-and-water, or brandy-and-water, which should be administered in small quantities, at regular and frequent intervals. In the case of an infant at the breast, the mother should adopt the dietetic suggestions contained in the chapter on “Indigestion.” The feet and the surface of the body generally should be kept warm, and the air of the apartment raised to about 65° Fahr., and this temperature uniformly maintained by day and night; watery vapour should be thoroughly diffused therein by keeping a kettle of water constantly boiling on the fire, or over the flame of a spirit lamp, and fixing a tin or paper tube to the spout to convey the vapour near to the patient. A partial or complete warm bath, and sponges well squeezed out of hot water and applied to the throat, are often useful measures. During the treatment everything should be avoided that would be likely to excite or irritate the patient. In very severe cases, a tent may be formed over the patient's bed, and steam conducted under it by a tube from boiling water. During cold weather, or in very susceptible patients, it is often necessary to keep the child in a large apartment, the air of which is made artificially warm and moist, for ten or fourteen days.

PROPHYLAXIS.—It may scarcely be necessary to remark, that when cold and cough are noticed in a young child, especially with *hoarseness and loss of voice*, he should be

sedulously watched, and guarded against influences likely to excite or aggravate inflammation, including protection from cold and *damp*, and a carefully-selected, light diet. If any feverish symptoms exist, a dose of *Aconitum* should be administered; in the absence of fever, a dose of *Hepar Sulph.*

The question of *Tracheotomy* is an important one; but as it is exclusively a professional subject, any further reference to it here would be out of place.

15.—Diphtheria.

DEFINITION.—Diphtheria is an acute epidemic disease, characterised by a peculiar spreading inflammation of the mucous membrane of the pharynx, with exudation of lymph, attended with great general prostration, and sometimes remarkable nervous phenomena.

SYMPTOMS.—Diphtheria is divisible into two classes. In one, happily the most numerous, the symptoms are at first so mild as to excite little complaint beyond slight difficulty of swallowing, or pain in the throat, and is readily cured by one or more remedies selected according to the accompanying symptoms. Very little constitutional irritation exists, there is no albumen in the urine, the appetite and sleep are natural, and no nervous symptoms or other sequelæ follow. In the second class of cases, however, the disease is ushered in with severe fever, rigors, vomiting, or purging, sudden and great prostration and restlessness; the patient has an anxious expression of countenance, and it becomes evident that the system is labouring under some overwhelming disease. The skin is hot, the face flushed, the throat is sore, occasioning difficulty both of swallowing and breathing, and the urine scanty and high-coloured. On examining the throat, the tonsils are seen to be swollen, and the mucous membrane has a bright-red colour; but soon grey or white patches of deposit appear on the tonsils, small at first, but gradually enlarging,

so that one patch merges into another, forming a false lining membrane to the throat. In some cases, the false membrane has been detached, and after extreme efforts ejected, presenting nearly an exact mould of the throat. The exudation of diphtheria may be distinguished from a slough by its easily crumbling, by the facility with which it can often be detached, and by the surface thus exposed being red, but not ulcerated. The false membrane looks like dirty wash-leather; and between it and the true membrane an offensive bloody discharge exudes, imparting to the patient's breath a most repulsive odour. The glands of the neck are always enlarged, sometimes pain is felt in the ear, and there is generally stiffness of the neck; the inflammation is liable to extend rapidly, in consequence of the continuity of the lining membrane of the throat with the mouth, nose, wind-pipe, and even the air-tubes of the lungs. If the disease progresses, the patient refuses to swallow, and earnestly entreats to be left alone, the restlessness passes into stupor, and the difficulty of swallowing food or liquid, or of breathing, increases, till the false membrane is forcibly ejected, or the patient dies from suffocation, the exuded membrane blocking up the air-tubes; or the patient sinks from exhaustion, similar to that observed in *Typhoid Fever*.

DANGEROUS SYMPTOMS.—A quick, feeble pulse, or a very slow pulse; vomiting, especially if it is persistent; drowsiness and delirium; epistaxis; dyspnoea; suppression of urine, or albumen in the urine. Diphtheria is most fatal in very young children, and it usually occurs from extension of the disease to the larynx; in adults the fatality is generally due to the systemic disease.

DIAGNOSIS.—Diphtheria resembles croup in the exudation of a false membrane on a mucous surface, but differs from it in several points. 1. The local inflammation begins in the pharynx instead of the trachea, although it may after-

wards spread to the fauces, œsophagus, and respiratory tract. 2. It attacks adults as well as children. 3. It is attended with extreme depression of strength, and in adults is usually fatal by asthenia, but in children sometimes by asphyxia, by obstruction of the larynx. Some have thought that diphtheria was only scarlatina without an eruption; but, although there is some analogy between these diseases, further investigation has shown that they are distinct affections.

CAUSES.—Impure air, from *imperfect drainage*, living too near stables, manure deposits, slaughter-houses, or where animal substances in a state of decomposition are exposed, with an insufficient supply of water. Thus *atmospheric poisoning* imparts to what might have been an ordinary sore throat the peculiar and dangerous symptoms of diphtheria.

TREATMENT.—The treatment recommended in the articles on *Quinsy* and *Croup*, should be consulted, as the remedies there prescribed are often required in Diphtheria.

The mild variety of Diphtheria is generally curable by the administration of a few alternate doses of *Aconitum* and *Belladonna*, and afterwards of *Mercurius* or *Nitric Acid*, the remedy being selected according to the existing symptoms. *Bell.* is especially useful if the tonsils are greatly swollen. “If there is any truth in the Homœopathic law, *Bell.* and *Merc.* are the chief remedies in diphtheria” (*Morgan*).

The dangerous form of the disease requires one or more of the following: *Bell.*, *Merc.*, *Iodine*, *Muriatic Ac.*, *Baryta Carb.*, *Nit. Ac.*, *Hepar Sulph.*, *Rhus. Tox.*, *Ars.*, *China*.

Iodine is probably the most truly Homœopathic of any medicine to the special characteristics of this disease, both in its constitutional and local manifestations. Dr. Kidd remarks on the use of this drug, “Diphtheria plainly enters the blood through the air-passages, and on its entrance excites a violent local action on the pharyngeal mucous

membrane at first, and subsequently on the laryngeal. The local action seems an expulsatory effort to cast out the poisonous miasm, and the constitutional result is, that of a depression on the nervous system, and of a disorganizer, on the entire mass of blood. The local and constitutional results are also at once sudden and severe in most cases. In every one of those special peculiarities, *Iodine* is an exact analogue. The inhalation of its vapour causes sudden irritation of the mucous membranes of the air-passages, nares, pharynx, and larynx; it also excites a vesicular exudation of an acrid nature.

“When absorption of *Iodine* has occurred to any extent, a sudden prostration, languor, anorexia, extreme restlessness, and constitutional irritation, are produced, with a tendency to syncope. Salivation is likewise rapidly produced *without ulcers* of the gums or *soreness* of the teeth, as in mercurial salivation, and the salivary glands, as well as the common glands, are suddenly irritated, and rendered painful. Aphthæ appear on the mouth, and the restlessness gradually passes into stupor and drowsiness. In addition to this very close analogy of the local and constitutional symptoms of diphtheria to those of iodine, we have its clinical experience in croup (in which it is the best of all remedies), in aphthæ, in glandular swellings, together with its powerful action as a disinfectant in throat diseases, in which it is of more value even than chlorine. In the early stage of the disease, especially when there is much glandular irritation, and where the disease extends to the larynx, it seems especially indicated. To produce a prompt and perfect influence over the disease, it is best to administer it—*similia similibus curantur*—in the mode of entrance of the disease itself—that is, by infinitesimal inhalation. This is done by placing iodine in substance or in tincture, in an open vessel in the room of the patient, as it is thus very slowly evaporated,

and mixes with the air in a highly divided and very active form. This need not interfere with its internal use, which should be frequently repeated. If Hahnemann were alive to prescribe for diphtheria, he would be as likely to advise the lowest dilutions—in substantial doses frequently repeated—as when he advised the strongest solution of camphor in cholera.”*

Muriatic Acid.—Dr. Kidd thinks this remedy ranks next in importance to *Iodine*, and is especially valuable after the latter drug has diminished the glandular irritation. Its indications are, pain and swelling of the mucous membrane of the throat, suffocative tightness of the chest, with cough, great prostration of strength, and foetid breath. For internal use, half-a-dozen drops of strong acid may be mixed with a table-spoonful of honey, (using a glass or porcelain spoon), and a small quantity taken every one or two hours.

Mercurius.—This remedy is indicated by *putrid salivation*, pain and swelling of the salivary glands, difficult swallowing, regurgitation of food through the nostrils, etc.

Merc. Iod.—This remedy has proved of great value in many cases of diphtheria, and is, by many practitioners, preferred to every other preparation of mercury, and should be administered as soon as any exudation patches are observable in the throat, or even when swelling of the glands of the neck is first noticed. The first or second dec. trituration is the form and strength in which we chiefly use it.

Arsenicum, in the last stages of the disease, is of immense value, particularly when the prostration of strength is very marked or is increasing; when there are oedema, and putrid odour of the throat and air passages, and when there is a tenacious foetid discharge from the lining membrane of the nostrils. Even in the first stage of diphtheria *Ars.* is required if the disease takes on the malignant type.

* British Journal of Hæmæopathy, No. LXVIII.

China, the strong tincture, may be alternated with *Ars.*, if the vital energies are nearly exhausted.

ACCESSORY MEANS.—In the commencement, a large, thick, hot poultice should be applied round the throat; but in advanced severe cases external applications are inadmissible as they rather tend to increase the œdema and extend the disease. The inside of the throat may be steamed from an inhaler, with the vapour from water with acetic acid. A wine-glassful of vinegar to a pint of water, is the proportion recommended. The temperature of the room should be maintained at 68° Fahr., and the atmosphere should be made moist by the steam from a kettle with a long spout constantly boiling on the fire. A moist warm atmosphere is easily secured for a child by forming a tent with blankets over the bed, and then bringing a pipe under it from the kettle-spout, or a spirit lamp.

In addition, *warm baths* are valuable accessories in the treatment of diphtheria. The skin is hot and dry, the urine is often suppressed, the bowels confined, and thus the poison is retained in the system. Warm baths, and the free use of cold water as a beverage, often call into vigorous action the functions of the skin, and the secretions from the bowels and bladder are restored.

DIET, ETC.—The strength of the patient must be well sustained, from the very commencement of the disease, by food and nourishment in the most concentrated form, and he must be urged to swallow such nourishment in spite of the pain which it occasions. Eggs beaten up in brandy, with hot water and sugar; beef-tea thickened with a little rice or pearl barley; arrow-root or sago with port or sherry; port wine, and sometimes stout or pale ale. Sudden, extreme prostration sometimes occurs, requiring wine or brandy in considerable quantities, at frequent intervals.

In the case of children who persistently refuse to swallow,

recourse must be had at the very outset, in bad cases, to nutritive injections. Dr. Kidd recommends the yolk of an egg beaten up with a tablespoonful of new milk, and two teaspoonfuls of fresh essence of rennet, or an ounce of extract of beef with a scruple of pepsine. Injections should be commenced immediately the true character of the disease is recognised, be repeated every two to four hours, and consist of about one ounce at a time.

Ice, kept almost constantly dissolving in the mouth, has a very beneficial action ; it affords comfort to the patient, and as a diluent it favours the action of the kidneys. If vomiting occurs, constantly sucking small pieces tends to allay it. The use of ice, therefore, in all cases of diphtheria, of croup, and of all sore throats, should never be forgotten.

LOCAL TREATMENT.—Dr. Madden recommends the tonsils to be painted three or four times a day with glycerine, and about every twelve hours to paint the whole affected surface with the pure tincture of *Muriate of Iron*. Under this treatment, he remarks, the swelling and redness of the mucous membrane subsides, the foetor of the breath rapidly decreases, swallowing becomes easier, and the deposit shrivels up and soon falls off. Internally he gives *Merc. Iod.*, and *Bichromate of Potass*, or if there is great prostration, *Arsen.* and *Amm. Carb.* The most experienced practitioners object to rough topical treatment, even the attempting to detach the false membrane, as it rarely fails to be reproduced in a few hours. *Tracheotomy* is sometimes performed, but it can hardly be expected to save life, inasmuch as the disease and false membrane extend down the trachea to the bronchi, beyond the reach of this operation. Much caution and patience are required during convalescence, as relapses are prone to occur. Nourishing diet, rest, and change of air are of great utility. Nothing does so much good as a thorough change of air.

PREVENTIVE MEASURES.—The cesspools should be emptied, and if too small or defective, new ones built. The house and local drainage should be thoroughly examined, and imperfections scrupulously rectified; the water-closets carefully trapped and ventilated, and, if necessary, chloride of zinc or of lime constantly kept therein, and thrown down the drains. All dust-holes and accumulations of refuse should be cleared away; while a plentiful supply of water should be kept in the house, and every room regularly well cleaned, white-washed, and thoroughly ventilated.

16.—Consumption (*Phthisis*).

DEFINITION.—Phthisis is a morbid constitutional condition, in which there is a growth or exudation in the lungs of certain bodies called tubercles, in which the processes of suppuration and ulceration are set up for their discharge, and is expressed by a gradual and persistent wasting of the body, heightened temperature, hectic fever, and other symptoms.

The growth of tubercle in the lungs, then, is only a local lesion—an effect of which phthisis is the cause. The weak and hurried pulse, the difficult breathing, the cachectic appearance, the nocturnal perspirations; these are but expressions of an all-pervading constitutional diathesis.

We are desirous at once to convey the opinion that consumption is the disease of a cachexia—a bad habit of body—and that no treatment can be effectual which does not tend to correct the constitutional predisposition to the further growth of tubercle, or even to anticipate, if possible, the development of the constitutional state which gives rise to such growths. The most scientific and practical observers are agreed that it is pre-eminently a disease of youth, “when nutrition is directed to the building up the tissues of the body,” that symptoms of phthisis most often arise,

which under proper treatment cease, “and years elapse before there is any renewal of the disease; and, were advantage taken of the intervening period to correct the constitutional cachexia, the cure might prove complete” (*Carswell*).

PATHOLOGY OF PHTHISIS.—The nature and origin of *Tubercle* having been briefly considered in the chapter on *Scrofula*, it is only necessary here to explain its connection with Consumption.

Tubercles, so called because to the naked eye they appear round, but are really starred or spiked, are about as large as millet seeds, and seem to have a preference for certain parts, especially the upper portions of the lung. Even when the tubercular substance is scattered throughout the whole lungs, the growth is here most abundant; it is here also that it runs a more rapid course, and first becomes ready for expectoration. The tubercular exudations in the lungs take place in the areolar tissue between the air-cells, in the air-cells themselves, and in the smaller bronchial tubes communicating with them.

They are at first hard, grey, semi-transparent, and called *miliary* tubercles, and may remain latent for an indefinite period. The practical conclusions of Lænnec, Clark, Bennett, and other scientific observers are, that if the further growth of tubercle can be arrested, those already existing may diminish in size, become absorbed, and the part cicatrize; or they may remain dormant, without exciting any symptoms, after undergoing a process called *cretification*. Frequently, however, from indigestion, defective hygienic conditions, bronchitis, or other cause, tubercles undergo a succession of changes; they become yellow, opaque, and soft, first in the centre, that part being the oldest and most removed from living influences; then, like foreign bodies, *they excite inflammation, suppuration, and ulceration in*

the neighbouring lung tissue; the products being usually coughed up and so expelled. The groups often continue to enlarge by fresh deposits till several groups communicate together, and form an abscess, or, in medical language, a *comica*; this bursts, and discharges its contents into an adjacent bronchial tube, and the matter is conveyed into the windpipe, and thence to the mouth, to be evacuated. Unless the disease is arrested by remedial measures, other abscesses form and unite, till the lung substance is so diminished in volume, and its continuity so completely destroyed, as to be incompatible with life, and the patient dies from exhaustion. In other cases, as before explained, either as the result of improved hygienic means, or the interposition of medical skill, the tubercular matter, with the inflammatory products it excited, are removed by expectoration or absorption, the tissues around the cavity contract and obliterate it, and so the disease is cured.

The frequent manifestations of this constitutional cachexia in the organs of breathing is probably owing to the great vascularity of the lungs, their loose and spongy texture, and their ceaseless movements.

‡ SYMPTOMS.—The early symptoms are obscure, and may arise at any age, but most frequently from the eighteenth to the twenty-second year; they are, impaired digestion; more or less cough; irregular pain of the chest; dyspnœa on slight exertion; debility or languor; progressive loss of flesh; flushing and quickening of the pulse in the evening; disturbed sleep with morning perspirations; and heightened temperature of the body. The cough is usually dry and short, and is most troublesome in the morning, or at any time during exertion; it seems to occur without any sufficient cause, such as catarrh, and may continue for some time without being aggravated, or without the supervention of any other symptoms. Frequently, but not invariably, there is

hæmoptysis (spitting of blood), and this gives the first intimation to the patient of the real nature of the malady; and its occurrence either before or soon after the commencement of a cough always renders consumption probable, especially if the patient has received no injury of the chest, has no disease of the heart, or of the uterine system. The amount of blood discharged is sometimes very small in the early stage, merely streaking the sputa, or there may be a few teaspoonsful, and it proceeds only from the small vessels that are congested in the neighbourhood of the tubercles; but in the latter stages there is sometimes a copious and even fatal hæmoptysis, arising from some large vessel being opened by ulceration and rupture of an artery in a vomica; but this is comparatively rare, because the vessels become plugged with coagula before the ulceration opens them. The patient complains of great languor; slight exertion excites an amount of fatigue quite disproportionate to the cause, quickens the breathing, and often gives rise to palpitation. *Emaciation*, one of the earliest symptoms of consumptive disease, extends to nearly every tissue of the body, the adipose, the muscular, and the bony; even the intestines and the skin become thinner; it often proceeds uniformly from the commencement to the termination, and appears to bear a closer connection with the constitutional, than with the local, affection. It is, indeed, liable to be increased by extensive disease of the lungs, of the intestines, of the mesenteric glands, and by hectic fever; but in the absence of these symptoms in their ordinary intense form, *wasting* still goes on to the fatal termination, the patient sustaining a total loss of one-third to half his entire weight. *Slow and gradual emaciation* is far more indicative of phthisis, than a rapid or irregular diminution of weight.

At length, *Hectic Fever* makes its appearance; the patient is feverish and flushed in the evening, and in the morning

is found drenched with perspiration : a most decided proof that the disease has proceeded to the *second stage*. There is soon a loss of appetite, accompanied by nausea and vomiting, incessant thirst, and abdominal pains. The face is frequently flushed, and on each cheekbone a circumscribed red spot may be seen, especially after exertion or eating. Burning heat is experienced in the palms of the hands and soles of the feet. Exhaustion and emaciation, from impairment of the digestive functions, are now confirmed and persistent symptoms ; while the increased susceptibility to cold renders the patient liable to frequent attacks of bronchitis, and even pneumonia.

In the *third stage*, all the symptoms are gradually intensified ; the dyspnoea becomes *very distressing*, so that the patient is unable to make any active exertion, or even to read a short paragraph without pausing ; the sputa is more purulent, and as the disease advances, pus is often expectorated pure, in roundish masses that remain distinct in the vessel into which they are spat ; the disease often spreads to other organs, as the lymphatic system and the intestinal canal, in which a deposit of tubercle takes place, similar to that in the lungs, which afterwards bursts into the intestines, leaving an ulcer ; and thus the entire alimentary canal is affected, and diarrhoea produced. The respiratory mucous membrane may also be ulcerated, producing huskiness, and even loss of voice, but more frequently the former, from the thickening and increase in vascularity which it undergoes. *Aphthæ* of the mouth, pharynx, etc., or œdema of the legs, ensue. It is therefore but seldom that the local affection of the lungs alone causes death.

The most characteristic symptoms are :—*undue shortness of breath* after exercise ; *cough* ; excessive *sensitiveness to cold air* ; *spitting of blood* ; *progressive emaciation* ; *rapid pulse* ; *hectic fever* ; and, lastly, *diarrhoea* and *apthæ*.

DIAGNOSIS.—On this point the thermometer affords us most valuable information. The ordinary symptoms and signs are often obscure, not well marked, or their true cause may be doubtful; especially in the early stages of the disease, when alone our treatment is likely to be of permanent avail. The importance of the aid of the thermometer in this case will be recognised by the fact, that during the deposit of tubercle in the lungs, or in any organ of the body, the temperature of the patient is always raised from 98° Fahr., the normal temperature, to 103° or 104°, the temperature increasing in proportion to the rapidity of the tubercular deposit. This heightened temperature may be detected by the thermometer for several weeks before reduced weight or other signs indicate the undoubted existence of tubercles. Hence the temperature not only affords us certain information as to the existence of *phthisis*, but the degree of elevation enables us to estimate the extent and progress of the disease.

PHYSICAL SIGNS.—These are chiefly elicited by the following methods of diagnosis: *Inspection*, or ocular examination of the external form, size, and movements of the chest; *Mensuration*, an aid to the senses of touch and vision in ascertaining the comparative volume of the two sides of the chest, as well as their expansion and retraction during breathing; *Percussion*, or striking, first on one side of the chest, and then on a corresponding spot on the other, to ascertain the relative degree of dulness or resonance; and *Auscultation* (*ausculto*, to listen), which is the investigation of internal disease by the sense of hearing, and is either *immediate* when the ear is placed in direct apposition with the surface of the body, or *mediate* when some conductor of sound, as a *stethoscope*, is placed between the ear of the auscultator and the patient.

The chief signs are *flattening of the chest*, from shrinking,

of the lung substance, in consequence of the air-cells being filled with tubercular matter, so that they cannot expand fully; they become wasted; and the part thus affected does not permit the same amount of *respiratory movement* as on the healthy side. The *clavicles* become very prominent, owing to the flattening of the *supra* and *infra* clavicular regions. On percussing the chest, there will be found *impaired resonance* due to the consolidation of tubercular deposit, the dulness becoming more marked as the disease advances. The chief *auscultatory signs* are, feeble breathing, or *harshness*, in which the natural soft and breezy respiratory murmurs are lost; a prolonged *expiration*, jerking *inspiration*, and *increase* of *vocal resonance*. To appreciate these and numerous other signs, and to interpret their significance, such an amount of medical knowledge is necessary, and extended practice both in healthy and diseased persons, as cannot be expected in a lay practitioner; it is, therefore, unnecessary in a domestic work further to refer to them. All doubtful cases, affecting organs so essential to life, should be early submitted to medical treatment.

CAUSES OF PHTHISIS.—The tubercular form of inflammation is sometimes congenital, but most often arises in youth, or before the middle period of life, from an enfeebled condition of the system—the tuberculous cachexia—induced by a confined atmosphere, deficiency of sunlight, unhealthy occupations, poor food, distress of mind, or cruel treatment, to which hereditary predisposition and scrofulous diathesis greatly contribute. We believe that the want of pure air consequent on the imperfect ventilation of sitting and sleeping rooms is one of the most frequent and potent causes of tubercular disease. In the mining districts of Cornwall and Devonshire, among the most healthy portions of our island, one half the entire number of the miners, deprived of pure air and light, die of phthisis. The reports

of the Registrar-General show also that the deaths from this cause among the inhabitants of towns are 25 per cent. greater than in the country districts; notwithstanding the fact that the dietary and general comforts of the former are often greater than those of the latter.

Nor is this statement restricted in its application to man. Observations made on the health and habits of the inferior animals confirm the fact, that defective ventilation and an insufficient supply of pure air is a fertile cause of tubercular disease in them. The cow, imprisoned in the town shed, the penned sheep, the confined monkey, the caged lion, tiger, or elephant, almost invariably suffer from tubercular disease, the cause being defective ventilation and want of healthy exercise in a free atmosphere.

In respect to the hereditary predisposition, it is not necessary that parents should be consumptive in order to transmit the consumptive constitution to their children. Almost any form of disease which invades the general system, especially when both parents are involved, is sufficient to render the offspring liable to phthisis. Observations tend to prove that there are families in which the elder children are healthy; but that if the health of the parents deteriorates during the increase of their family, the younger are feeble, and ultimately become the subjects of tubercular disease. The connexion therefore of the parental health with phthisis seems to be the transmission of the tuberculous cachexia; the efficient producing cause is "the impoverished nutrition resulting from *impure air*, and an *improper quantity, quality, or assimilation of food*; and so long as misery and poverty exist on the one hand, or dissipation and enervating luxuries on the other, so long will the causes be in operation which induce this terrible disease" (*Bennett*).

DURATION OF PHTHISIS.—The average may be said to be *from nine months to two years*; but in an acute case,

the tubercles grow rapidly through the entire substance of both lungs, and it may prove fatal in two or three months, or even in as many weeks.

TREATMENT.—This may be preventive, remedial, or palliative. Useful remedies may be found among those recommended in the treatment of “Cough,” “Bronchitis,” “Pneumonia,” and other diseases of the organs of breathing; to which the reader is referred. This being a disease in which the assistance of a medical man is so necessarily required, we only refer here to a few remedies, as the treatment must be adapted to each individual case according to the nature and extent of the local and constitutional disease.

First Stage of Phthisis:—Amm. Carb., Bry., Calc., Carbo V., Ferrum, Lyc., Merc., Nux, Phos., Phos. Ac., Puls., Stan., Sulph., Zinc.

Second Stage:—Acon., Calc., Carbo V., Coni., Hepar S., Nit. Ac., Phos., Samb., Sulph.

Third Stage:—Ars., Chin., Hep. S., Phos., Sil., Verat.

Profuse debilitating perspirations:—Phos. Ac., Sulph. Ac., China.

Hæmorrhage from the lungs:—Acon., Arn., Ipec., Ham. V., Dros., Kreo., Phos., China.

Colliquative diarrhœa:—Verat., Ars., Phos. Ac., Merc. C. In painful and incurable cases, an injection of starch and opi., or linseed mucus and opi., as directed under “Enemata.” See the index.

Calcareæ. —Extreme sensitiveness to cold or damp; general emaciation; fatigue after slight exertion; imperfect digestion and diarrhœa; cough with expectoration of offensive, greenish, or yellowish matter, sometimes with blood; and, in girls, profuse and too frequent menstruation.

Kali Carb.—A remedy scarcely less important than *Calcareæ*, both in incipient and confirmed consumption, and chiefly indicated by racking cough, producing vomiting, or

cough with purulent expectoration; also in females who have been impoverished by nursing many children, or by frequent miscarriages.

Phosphorus.—Indicated alike in early or confirmed cases, in children, and especially in young girls of a delicate constitution, with frequent, dry, short cough, so constant as to lead to complete exhaustion of strength; shortness of breath; tendency to diarrhoea or perspiration, emaciation, etc. The patient complains of pain and soreness of the chest, loss of appetite, dry or hot skin, and small and quick pulse. A marked improvement frequently attends the timely use of this remedy.

Stannum.—In the first stage, with profuse expectoration of colourless mucus; or when neglected catarrhs threaten to terminate in phthisis.

Hepar Sulph.—For scrofulous young persons, in the early stages of the disease. The chief symptoms are, hoarse, rough, or weak voice, hollow cough, accompanied by expectoration of mucus, sometimes of blood; dyspnoea, especially on lying down; night sweats; pain after eating the smallest quantity of food; clay-coloured or greenish stools.

Lycopodium.—Cough with purulent expectoration, spitting of blood, saltish mucus or pus, or general consumptive symptoms.

China.—Indicated after repeated attacks of pulmonary hæmorrhage, or in debility arising from bloody evacuations, profuse perspirations, or other discharges. *Ferrum* is often of essential service after *China*.

Silicia.—Useful under similar conditions to *Phosphorus*, especially in indigestion with sour taste of food, pressure at the pit of the stomach, water-brash, or nausea; great sensibility to chills and cold; profuse acid perspirations; excessive emaciation and weakness; hoarse, hollow cough, with expectoration of pus or blood; foetid breath; laboured and short breathing.

Arsenicum.—A valuable medicine in all stages of the disease, especially in the last, and when diarrhoea, rapid wasting, exhaustion, and distressing dyspnoea, are prominent symptoms.

Arnica.—Vomiting or expectoration of bright-red, clear, or frothy blood; it may be alternated with *China*.

Drosera.—Severe fits of coughing, causing frequent discharges of blood. *Phosphorus* and *Ipecacuanha* are also important remedies under similar circumstances.

Sulphur.—As an intercurrent remedy; also for patients who have been troubled with eruptions or sores on the skin. As a remedy it is closely allied to *Calcareo*.

Aconitum.—Often useful and soothing; two or three doses may always be administered when inflammatory symptoms develop themselves.

ADMINISTRATION.—As a preventive, before any active symptoms have declared themselves, a dose night and morning will be sufficient, for a few days; afterwards continuing the remedy for a week or two, once every twenty-four hours; in acute cases, every three or six hours.

GENERAL MEASURES.—To describe in detail the general treatment of consumptive patients, were to write a treatise on hygiene; we shall therefore only throw out hints on the most important points.

1st. *Nutritious Food*.—The diet should be nourishing, digestible, and sufficiently abundant to meet the particular requirements of each case. As a general rule, it should include animal food once or twice a day; fish, especially oysters; good home-made bread, not less than one day old; puddings of arrowroot, rice, sago, or tapioca; various kinds of green vegetables and mealy potatoes; good milk is a fundamental article; raw eggs, swallowed whole, or beaten up with a little milk, or wine, or rum, are strongly recommended; and, if the patient is benefitted by its use, a

moderate allowance of beer or wine. Pork, in any of its forms, should be avoided—ham, sausages, lard; also veal; fish not having scales; pastry; and all articles that give rise to irritability of the stomach, nausea, eructations, or any other symptoms of indigestion.

The importance of selecting digestible food exclusively, is evident from the fact that tubercular deposit never takes place, except during a period of imperfect nourishment of the body from loss of tone in the digestive organs. By whatever means we increase the nutrition of the body, in the same ratio we remove or retard the advance of consumption; an invariable sign of improvement being an increase in the patient's weight. The system is invulnerable to consumption so long as it is well nourished by a healthy digestive apparatus.

Cod-liver oil may be considered as an item of food, and its power in checking emaciation and improving the healthy tone of the muscular structures, are too well known to require much comment here. At one hospital in London (Brompton) more than 600 gallons are consumed every year. It may be advantageously given in scrofulous diseases, and in any case in which there are indications of weakness, emaciation, languor, troublesome cough, especially if occurring in a family in which consumption has been known to exist. It should never, however, be given in quantities so large as to excite nausea or eructations. At first it should be administered in teaspoonful doses, twice a day, gradually increasing the quantity as it can be borne. When there are insuperable difficulties to the internal use of the oil, enemata containing it may be tried; or it may be introduced into the system by inunction, or by applying lint, saturated with it, to the chest, sides, or between the shoulders. The continued use of this agent nourishes *the body*, improves the tone of the pulse, checks the ex-

pectoration and night sweats, and diminishes the cough. It should not, however, be alone relied on, but used only as an adjunct to such remedies as *Calc.*, *Phos.*, *Stann.*, *Lyco.*, *Zinc.*, etc.

As a substitute for cod-liver oil, which often disagrees with the stomach, Dr. Baikie informs the author that he has found *Cream* of great value. To prevent its sitting heavy on the stomach, a teaspoonful of French brandy, or, what is better, a tablespoonful of cold, strong, black tea may be mixed with it.

2nd. *Clothing*.—This should be sufficiently warm to maintain in vigour the cutaneous circulation; the extremities especially should be kept warm, to obviate congestion in the chest or abdomen. Flannel should be worn both in summer and winter; in the former, it neutralizes any variation of temperature; in the latter, it supplies direct warmth. In winter, the addition of a chamois leather vest may be advantageously worn over the flannel. The notion that children may be hardened by habitually exposing them to atmospheric changes, when but imperfectly clad, is erroneous in all cases, and in the instance of children of tuberculous predisposition, often leads to the worst results. It is in the spring that our climate is so treacherous, and this season especially requires careful attention to clothing.

3rd. *Bathing and friction of the skin*.—Except in confirmed pulmonary consumption, bathing is generally beneficial; even sea-bathing may be often recommended. The best season of the year is from July to October; and the best time of the day is perhaps about two hours after breakfast. The object sought is, to produce a *vigorous reaction*; and to secure it the nervous and circulating systems should be in some degree of excitement, and there should be a slight augmentation of the temperature of the skin, although it should not be in a state of perspiration. But on no account

should the patient bathe when exhausted by fatigue, or when the body is cooling after perspiration. If the bather be strong, he may plunge into the open sea early in the morning before breakfast, not only without injury, but with decided advantage; but the forenoon is the most appropriate time for a weak child or delicate patient, as then the air has become warm, and the system has been invigorated with nourishment. When sea-bathing is not admissible, sponging the chest both in front and behind can generally be borne and enjoyed, and where it is followed by a general glow, it is a most valuable aid in promoting the capillary circulation. Under all circumstances, vigorous friction should immediately follow the bath, as reaction is thus rendered more complete. In cases in which patients are prevented from taking exercise, friction by means of a towel or flesh-glove is the more indispensable. Bathing must be regarded as injurious if a brief immersion renders the surface cold, numb, and pale. In such cases, warm salt baths are recommended.

4th. *Exercise*.—Next to diet, the unrestrained exercise of the muscles and lungs in the pure open air is of the greatest importance. “The more fully the lungs are judiciously used, the more is their capacity nursed; and conversely, the less they are used and expanded, the more useless are they likely to become, if not absolutely diseased. Under a judicious system of training, an undeveloped man, even although he may be feeble, narrow-chested, and sickly, may yet become active, full-chested, and healthy. It is therefore within the power of the medical officer to direct the physical training of young persons, so that the apparently sickly and the short-winded may in time be developed into the wiry and active young man, long in wind, sound in body, and lithe of limb; a result which, however, can only *be attained* by judicious feeding, careful exercise throughout

the development of the body, and by the gradual nursing of the breathing powers" (*Aitken*).

If possible, exercise should be so taken as to bring all the muscles into moderate and agreeable action, and with the body in an erect posture. Walking exercise best secures these conditions; at the same time riding on horseback has the advantage of permitting the patient to breathe a large amount of fresh air, while the exercise does not occasion great difficulty of breathing. Excessive exertion of the brain should be avoided, and an interest taken in the objects and operations of nature, such as the garden, the farm, and the hill-side.

5th. *Pure Air*.—The want of an abundant supply of fresh air and the retention of carbonic acid gas in our sitting-rooms and bedrooms is a potent agent in the production of phthisis. Provision should be made for the uninterrupted but imperceptible renewal of the air. The sleeping-room should afford a space of 1,000 cubic feet; and one room should on no account perform the double offices of a sitting-room and a bed-room. One of the most vital elements of tonic treatment exists in fresh air; while everything which impedes or interrupts the free and complete interchange of air breathed, favours the development of tubercle.

6th. *Healthy Residence*.—A person predisposed to tubercular disease should select a moderately-warm climate. Warm air soothes the trachea and bronchial tubes, and the external warmth tends to keep the blood to the surface of the body, and so obviates congestion of the lungs; and further, the warm air being rarified, less oxygen is inspired, and less carbonic acid given off, so that less vigorous breathing is required; and, also, the liver in the warmer climates seems to take on some of the offices of the lungs. The climate, however, must be *dry*, as damp is prejudicial. The writer is strongly convinced that entire change of climate, if

adopted before the disease has produced irreparable changes in the lungs, is the most effective and permanent remedy. The climate of Australia is perhaps the best for the permanent residence of consumptive patients, contrasting most favourably with the long-esteemed resorts of Southern Europe, which, however grateful they may be in winter, are almost intolerable in summer. One of the prominent characteristics of the climate of Victoria is the small mean annual range of its temperature. From observations made in Melbourne, in the years 1860, 1861, and 1862, Dr. Bird* states that the greatest heat recorded during the day was 78°, and the greatest cold 46°. While the average summer heat is only 4° higher than that in London, the lowest temperature ever experienced in winter, and that very rarely, is 32°. Comparing the southern and western coast of England with the climate of Victoria, the same gentleman states, "The former is moist, cloudy, and relaxing, while that of Victoria is dry, sunny, and stimulating." The following statistics are very confirmatory of the great advantages which Australia offers to persons with a predisposition to diseases of respiration, and we recommend the work of Dr. Bird from which they are taken, to all interested in the subject.

"In the British Islands, 40 per cent. of the annual mortality at all ages is caused by disease affecting the respiratory organs, that is to say, pulmonary consumption, bronchitis, pneumonia, pleurisy, hydrothorax, asthma, quinsy, laryngitis; while the same diseases, on an average of six years, from 1854 to 1860, caused in Victoria only 15 per cent. of the total mortality at all ages."

Confining ourselves to the several varieties of the tubercular order, we find that in 1861 (an unusually wet year)

* "On Australasian Climates, and their Influence in the Prevention and Arrest of Pulmonary Consumption."

only 434 deaths were registered as occurring from this cause, that is to say, about 12 per cent. of the total mortality. In Europe, pulmonary consumption alone causes about 20 per cent. of the whole mortality. In Melbourne, this disease caused, in 1861, rather over 7 per cent, of the whole mortality. These, however, were town statistics. Dr. Bird believes that "the deaths from pulmonary consumption in the colony at large are probably not more than $4\frac{1}{2}$ or at the utmost 5 per cent." of the total mortality.

It is, however, only in the very early stages of the disease that we advise a voyage to, and a residence in, a colony 15,000 miles distant. A long sea voyage, though extremely beneficial in cases of incipient tuberculosis, would aggravate the sufferings of a patient in advanced stages of the disease, and hasten the fatal issue. Patients should not, therefore, on any account be sent away from home and friends without a reasonable expectation that the case admits of benefit by such change, as it has too often happened that patients have left home merely to die. When removal to a foreign climate is impracticable, Torquay, the Undercliffe of the Isle of Wight, Hastings, and Queenstown,* are places in our own country to which consumptive patients may often resort with great benefit.

* Dr. Tuthill Massy has shown in a recent paper published in the *British Journal of Homœopathy*, that *Queenstown* has a climate for consumptive patients superior to any on the south of England or France. The winters are mild and the summers are cool. Spring and autumn have equal advantages, from the peculiar geographical and geological position of the island, situated as it is in the beautiful harbour of Cork. Dr. Massy writes:—"The river from Cork to Queenstown is full of life, with steamers plying up and down every hour, and frequently going to the back of the islands, and out to the mouth of the harbour and light-house, giving gentle sea-air and exercise, without sea-sickness, to the invalid. In no part of Europe are there better adapted, or more elegant steamers, combining cheapness with cleanliness and excellent accommodation; and for the consumptive, whose very life is air—pure, phosphoric, mild, out-of-door air—I know no watering-place, or winter residence, which offers so much and so many advantages as this '*noble sea-avenue to Cork*,' which has been compared to the Bosphorus, filled with classic tale and history."

7th. *General Hints.*—All excesses must be avoided, whether in the pleasures of the table, wine and liquors, exercise, or in the gratification of any passion, which overstimulates the mind or the body. Business and intellectual pursuits should not be followed to the extent of inducing mental or bodily fatigue, but should be laid aside as early in the day as possible, and while there is sufficient strength remaining to permit of the patient's engaging in healthy exercise.

17.—Domestic Accessories Useful in Various Inflammatory, Debilitating Diseases.

In the feverish and languid state of the body accompanying severe or protracted constitutional affections, when the thirst is great, appetite gone, and the needed nourishing food is rejected, it is desirable to have some means at hand by which to palliate the sufferings of the patient. We therefore suggest the following, as being at once nourishing and soothing:

Essence of beef.—Beef-tea is best made as originally directed by Liebig. “Mince, as fine as possible, a piece of lean beef; let it stand in its own weight of cold water (a pound to a pint) for six minutes; place on the fire till it boils; then let it simmer for fifteen or twenty minutes; strain, and add a little salt.” By this method excellent beef-tea is *quickly* prepared, an important consideration when an exhausted patient is waiting for food. Druitt directs its preparation as follows:—“Take a pound of lean beef, free from skin, bone, and fat; chop it up; put it into a large earthen jar with cover; cement the edges with flour paste; tie it up tightly in a cloth; plunge it into a saucepan, and let it boil for two hours; pour off the liquid essence from the coagulated muscle; let it stand till cold; skim off the fat.” This contains a large quantity of nutriment, is generally

pleasant to the palate and stomach, and is particularly suited to patients in the last stages of consumption; also to patients generally after profuse hæmorrhage, in great debility, extreme emaciation, etc. A few teaspoonfuls may be given every three or four hours.

Barley-Water.—Take two ounces of pearl-barley (Robinson's Prepared Barley is the best), pour boiling water over it to wash it; after it has drained, pour on it a quart of boiling water, and boil for fifteen minutes; then strain it, and flavour with currant jelly, orange juice, or sliced liquorice root. This is a valuable demulcent in colds, affections of the chest, hectic fever, and consumption generally. It is also useful in *strangury* (painful urination) and other diseases of the bladder and urinary organs.

Gum-Water.—Gum is a nutritive substance of the mildest character, being less stimulating than any other form of nourishment. On this account it is admirably adapted to inflammation of the mucous membranes generally, as in catarrh, bronchitis, etc. *Gum-Water* is prepared by adding two ounces of gum-arabic, and from half-an-ounce to an ounce of white loaf-sugar, to one quart of hot water.

Nitric Lemonade.—Add ten drops of *Acidum Nitricum* to one pint of pure cold water, and flavour with honey or loaf sugar; from a teaspoonful to a tablespoonful, according to age, two or three times daily. This is very useful for allaying sickness in consumption, whooping-cough, asthma, chronic bronchitis, loss of blood from the bowels, foetid smell of the skin or urine, cold feet, night sweats, etc.

Linseed Tea.—This is prepared by adding one ounce of linseed, and half an ounce of sliced liquorice root, to two pints of boiling water, and macerating in a covered vessel near the fire for two or three hours; it should then be strained through a piece of muslin, and two table-spoonfuls taken as often as necessary. It forms a cheap

and useful drink, which soothes the irritation existing in coughs, catarrh, consumption, pneumonia, diarrhœa, dysentery, inflammation of the bowels, leucorrhœa, difficult micturition, and other inflammatory diseases. See also "Barley-water" and "Gum-water," which are useful in like affections, one being used when the patient gets tired of another.

Injections.—Injections up the lower bowel, by means of the enema syringe, are of great utility, not only in cases of confined bowels, piles, and fistula, but as a kind of internal fomentation to the intestinal canal, and often succeeds in allaying the most distressing irritation, thus producing tranquillity when other means fail. In low hectic fever, when the contents of the bowels stimulate to frequent or involuntary evacuation, or in abrasions of the intestines and *tenesmus*, the following enemata may be used:—Pour a quart of boiling water on two ounces of linseed, let it macerate near the fire for two or three hours, strain, and when cool, throw up the bowel a small quantity of the mucus thus obtained (two to four ounces): the patient should retain the horizontal posture, and otherwise favour the quietude of the bowel. In instances of ulceration of the bowels, with *severe pain and sleeplessness*, a teaspoonful of opium wine or laudanum, may be added to the linseed mucus, as a palliative.

CHAPTER IV.

DISEASES OF THE ORGANS OF DIGESTION.

1.—Digestion.—Why we eat.

HUMAN life has been compared to a fire; and the analogy holds good from more than one point of view. Just as fire requires fuel that it may burn, so life requires food for its sustenance. Further, the processes of life are attended with the production of a certain amount of heat, as fire is, and the result of the combustion of the materials of food resembles that of burning fuel in a fire, the consequent heat being the same in both cases. The body, moreover, is in a condition of perpetual change, by the various processes, and the wear and tear, of life. This change continues under all circumstances, so that there is a constant waste of structure in the sustenance of the living body, even when the condition of the body is one of almost absolute repose.

While a person lies at rest, there is an unremitting expenditure of material, which must be drawn from the external world, to maintain the strength and integrity of the bodily functions; the heart continues to beat, respiration goes on, the blood circulates, the brain is in action, and numerous other processes uninterruptedly go forward, from which alone a waste results which must be repaired.

Under ordinary circumstances, however, when both the mind and body are actively employed, the waste of human tissue is much more rapid, and a large amount of new material is required for its reparation. A man, for example, weighing from ten to twelve stones, loses in twenty-four hours three to four pounds of matter in the performance of the various duties of life. Now the matter thus expended is replenished by the introduction of food into the stomach,

and which passing along the alimentary canal, is acted upon by various secretions, by which process the nutritious particles are elaborated and conveyed to the different tissues of the body. But before the materials thus introduced are adapted to enter into the animal tissues, they must be assimilated by certain organs, namely, those of *Digestion*, *Respiration*, and *Circulation*. The first of these receive the food, and change it into a milky fluid, the *Chyle*, which being conveyed with the venous blood into the right side of the heart, is propelled by the contraction of that organ into the lungs; here it is intimately exposed to the atmospheric air, and thus the conversion into bright arterial blood is completed. It is now received into the left side of the heart, and thence into the general circulation, and in the *capillaries* (minute, hairlike vessels), it enters into the various tissues of which the body is composed. Again, the result of the functional activity of the body is that it is maintained at a certain temperature. If a thermometer is placed under the tongue, the temperature will be found to be 98° Fahr., which is greater than that of the atmosphere, this heightened temperature being the result of the combustion of food in the system. The function of digestion, then, first repairs the waste of the body; and, secondly, it maintains it at a proper temperature.

2.—Indigestion (*Dyspepsia*).

Digestion has just been described as the grand process by which nature repairs the wasted tissues of the body, which, when the individual is in health, is performed with great faithfulness and regularity, and without giving rise to any disagreeable sensations. *Indigestion* is a disease which consists of a deviation from this healthy function, and is one of the most common affections the physician has to treat.

SYMPTOMS.—These vary greatly both in their character and intensity, but there is commonly one or more of the following:—Impaired appetite; flatulence, from imperfectly digested food, or food in a state of putrefactive change in the stomach; nausea and eructations, which often bring up bitter or acid fluids; furred tongue; foul taste or breath; heartburn; pain, weight, and inconvenience or fulness after a meal; irregular action of the bowels; headache; diminished mental energy and alertness; dejection of spirits; palpitations of the heart, and various affections in other organs. Disturbances in remote parts may be due to *reflex action*, or to the effects of distension of the stomach, which, encroaching on the space occupied by the lungs, heart, or other organs, impede their healthy action.

CAUSES.—Irregularities in diet; such as indulgence in the luxuries of the table, partaking of rich, highly-seasoned, heavy, fat, sour, or bad food; eating too quickly; imperfect mastication of food; eating too frequently, or, on the other hand, too long abstinence from food; warm and relaxing drinks; the use of green tea, coffee, tobacco, wine and alcoholic drinks; too little out-door exercise; excessive bodily or mental exertion; late hours; exposure to cold and damp, etc. Business, or family anxieties, are frequent causes of dyspepsia, and their operation is very general and extended, implicating not only the mucous coats of the stomach, but the liver, the bowels, and often the whole nervous system. “The battle of life” is too often fought, not only with much wear and tear, but with almost overwhelming anxieties and disappointments; and the digestive organs are often the first to suffer from depression of the mind. In this respect, the cause is often put for the effect, the common remark being that depression of spirits accompanies indigestion, but the reverse of this is

the truth, namely, that indigestion accompanies depressed spirits. When the mind is depressed by disappointment, anxiety, or trouble, there is a corresponding depression of the energies of the nervous system, and so the stomach, in common with other organs, loses a portion of its vital energy. As medical men, we are often called upon to minister to "wounded spirits;" and no more touching revelations are anywhere made than in the consulting room of the conscientious physician.

TREATMENT.—The use of medicines and the observance of proper dietetic rules and habits, as suggested a little further on, must ever go hand-in-hand; for the former, however carefully selected, will, alone, be unavailing.

LEADING SYMPTOMS IN INDIGESTION.—*Recent Dyspepsia.*—Acon., Ipec., Puls., or Nux Vom.

Chronic Cases.—Hepar Sulph., Carbo. Veg., or Sulph.

Dyspepsia in Children.—Cham., Ipec., Puls., or Sulph.

In the Aged.—Ant. Crud., Carbo Veg., China, or Nux.

From too little Exercise.—Bryonia, Nux Vom., Sepia, Sulph.

From excessive use of Cold Water, Ices, or Fruits.—Arsen., China, or Verat.

From too Prolonged Watching.—Carbo Veg., China, or Nux Vom.

From Grief.—Ignatia, China.

From Cold.—Acon., Ars., Merc.

From fat Food or rich Gravies.—Ant. Crud., Puls., Ipec.

Caused by Sexual Excesses.—China, Phos. Acid, or Staph.

From Debilitating Losses, such as diarrhœa, hæmorrhage, suppuration, etc.—China, Ferrum, or Phos. Acid.

From excess of Food.—Ipec., Nux Vom.

In Hysterical Females.—Puls., Sepia, Veratrum, or Platina.

*From the use of Intoxicating Drinks, Tobacco, Coffee, etc.—*Acon. (*strong tincture*), Nux Vom., Ipec., or Sulph.

*When almost any kind of Food Disagrees.—*Carbo Veg., China, or Hep. Sulph.

Nux Vomica.—Distension, tenderness, and fulness of the stomach after meals ; heartburn, sour acid risings, flatulence, frequent vomiting of food and bile, sour or bitter taste in the mouth ; the head is confused, as after intoxication ; the patient feels indolent and sleepy after a meal, and unfitted for mental or physical exertion ; there is a sallow, yellowish complexion, and constipation. *Nux* is particularly indicated in persons of dark bilious complexion, who take too little exercise in the open air, eat too much, or drink alcoholic liquors. A tendency to piles is a further indication for *Nux Vomica*, and also for *Sulphur*, which may often advantageously follow it.

Pulsatilla.—Generally more suited to females with deranged period, or to individuals of a mild, easy character, with a disposition to much secretion of mucus, or to heartburn, with acid, bitter, or putrid taste in the mouth ; frequent and loose evacuations ; also for indigestion from the use of too much fat food or pastry.

Antimonium Crudum.—Aversion to food, or loss of appetite ; sensation as if the stomach were overloaded ; eructations, tasting of the food, nausea and inclination to vomit, or vomiting of mucus and bile ; escape of flatulence by the mouth or rectum, with an almost immediate reproduction of the symptoms ; alternate diarrhœa and constipation ; also when the disease can be traced to overloading the stomach. Pimply eruptions on the face, or sores on the lips or nostrils, are further indications for this remedy.

Ipecacuanha.—Distressing nausea, a sickly feeling, vomiting of food, retching with vomiting of mucus and bile, often with diarrhœa.

Bryonia.—Aversion to food, and craving for stimulants; frequent bitter eructations; bitter taste; nausea or bilious vomiting; stitch-like pain, extending from the pit of the stomach to the shoulder blade-bones; painful soreness at the pit of the stomach on coughing or taking a deep breath; confined bowels; obstinate and irritable disposition.

Chamomilla.—Bitter or putrid taste in the mouth; dirty, yellow-coated tongue; vomiting of greenish mucus or bilious matter; fretfulness, irritability, restlessness, and sleeplessness. Particularly suitable for women and children.

China.—Indigestion from loss of animal fluids, such as in hæmorrhage, diarrhœa, or other discharges; or when it occurs in damp or foggy weather, or in localities where the atmosphere is loaded with exhalations from standing waste marshes, and the air is filled with fog and noxious vapours; the patient is weak and inclined to rest after slight exertion, has a poor appetite, with uneasiness and drowsiness.

Ignatia.—Indigestion from care or grief, or in persons of a nervous temperament, with disinclination to company, and desire for solitude, inclination to brood over real or imaginary troubles. The general symptoms are, pale or sallow countenance with an expression indicating despondency; feeling of weakness or distress at the stomach after eating; fulness and distension of the bowels; variable appetite; a thick white fur on the tongue; dread of approaching evil, and despair of recovery.

Mercurius.—Putrid, sweetish, or bitter taste; dislike to solid food, especially meat; desire for cooling things; pressure and tension in the region of the stomach; nausea and inclination to vomit; constipation, with frequent, painful, and ineffectual urging to stool.

Hepar Sulphuris.—*Chronic* indigestion; nearly all kinds of food disagree; craving for stimulants; also if *Mercury* has been freely given.

Sulphur.—Suitable in most cases of long standing, and as an intercurrent remedy, when only partial relief has followed the use of other remedies. It is particularly required in *strumous constitutions*, and for indigestion associated with or following acute or chronic *eruptions*, *piles*, constipation, irritability, glandular swellings, affection of the eyes, or other scrofulous affections.

Dose and Administration.—See page 49.

ACCESSORY MEASURES.—The following points in the treatment and prevention of indigestion are of great importance.

1st. *Mastication*.—The reduction of food to a state of minute division in the mouth is a most essential step towards easy and perfect digestion. Digestion really means solution; and just as solid substances, intended by the chemist for solution, are first reduced in the laboratory by the pestle and mortar, so must the teeth perform a precisely similar process with the food. Not a particle capable of being further reduced by the teeth should be admitted into the stomach, as the appropriate work of the former can never be faithfully performed by the latter. A stomach, especially if weak, acts tardily and imperfectly upon food introduced into it in an incomplete state of comminution. The consequences are, the warmth and moisture of the stomach evolve gases, acids are formed, and the offending mass is either vomited, or it passes into the bowels and becomes a source of irritation during its entire passage along the intestines. Further, food requires to be carefully chewed, not only to break down the food into minute portions, but also that it may be duly mixed with saliva. In front of the ear we have the parotid gland; beneath the jaw at the sides, the submaxillary; and under the chin, the sublingual; all these secrete saliva, which pours into the mouth through minute openings during mastication. This salivary secretion is not only intended to moisten and

lubricate the food, but is a most essential chemical aid to digestion, such as no other liquid can supply. We therefore warn the busy, the studious, the solitary, or on the other hand those persons who talk too much during meal-time, against the danger of neglecting the perfect mastication of their food. *The loss of teeth* is a frequent cause of indigestion, but now, happily, easily preventible; for when the natural teeth are lost, the skill of the dentist supplies us with useful substitutes.

2nd. *Overloading the Stomach.*—Too large a quantity of food interferes with digestion in two ways. (1) By so distending the stomach as to interfere with those churning motions which it undergoes during the process, and impairing its subsequent necessary contraction. (2) Because the secretion of the gastric fluid is probably of a uniform quantity; therefore an inordinate amount of food would not be duly saturated with that fluid which is indispensable to good digestion. The limits of the normal capacity of the stomach are always exceeded when food has been taken in such a quantity as to produce an uneasy sense of distension. After long abstinence from food, as in the case of persons who dine late, there is great danger of eating too much; under such circumstances the meal should be taken slowly, or finished before the sensations of hunger are completely appeased. The same danger is likely to arise when there are too many dishes, or too stimulating articles of food are used. A morbid craving for food is thus excited long after the natural appetite would otherwise have been satisfied.

3rd. *Suitable Food.*—As a rule, animal food is easier of digestion than vegetable, it being nearer in composition to the textures with which it is to be incorporated. The human organs of digestion are more like those of a carnivorous than a graminivorous animal, and it is well known that a weak stomach is much more liable to flatulence, and other

symptoms of indigestion, after vegetable food than after animal. Indeed, the teeth of man partake of an intermediate character, as he is no doubt destined to subsist both on animal and vegetable food. So that a due admixture of both,—broiled or roasted or boiled meat or fowl, with thoroughly cooked vegetables,—is probably more easily disposed of by a weak stomach than a more or less exclusive use of either. It is important to remember that *starch* is not a nitrogenous or flesh-forming substance. Foods, therefore, the chief constituent of which is starch, as potatoes or rice, should be eaten only as additions to food containing a large amount of nitrogenous materials. If, then, we eat potatoes, rice, sago, or tapioca only, we are eating food that possesses little or no flesh-forming materials, and feebleness and disease can only result from such a diet. Further, it is especially necessary that the dyspeptic should select animal food that is *tender* and so cooked as to retain all the juices which enter into the composition of the tissues. Hard, dried, and cured meats—ham, tongue, sausages, and the like—are especially to be eschewed. In the same category we may place veal, pork, twice-cooked meats, salmon, lobsters, crabs, salads, cucumbers, raw vegetables, cheese, new-baked bread, coffee, and all substances known to disagree with the patient.

4th. *Appropriate Drinks*.—We unhesitatingly state that, as a general rule, which admits, however, of some exceptions, patients who suffer from indigestion would be better without malt liquors, wines, or spirits, and that in general, men, women, and children, can best maintain a high standard of health without the use of alcohol at all. No doubt, certain acute cases of indigestion, or cases in which the powers of life are greatly enfeebled, are benefitted by a *moderate* and *temporary* use of beer, wine, or spirits. But if even the sparing use of these beverages is followed by excitement, flushing of the face, or any other inconvenience,

they should at once be given up. Even when their use is at first attended by apparent benefit, they should be discontinued when the circumstances which required them no longer exist. In my own practice I have found that the most severe and obstinate forms of indigestion occur as the result of the excessive use of alcholic beverages. In addition to *Cocoa* for the morning, and tea for the afternoon meal, the moderate use of *pure water* is almost the only fluid required. This liquid, so often despised, and even regarded as inimical to the well-being of man's frame, is one of the most potent means for preventing or curing dyspepsia. Drinking water, however, must be done in moderation. Two or three glasses a day is enough for most people. It is best to avoid drinking much cold water at meals, not as is generally supposed because it dilutes the salivary secretion or the gastric juice, but because it lowers the temperature of the stomach.—(See Beaumont on Digestion.)

5th. *Disposition in which to eat.*—A cheerful and tranquil frame of mind, especially during meals, is a most essential point in the treatment and cure of indigestion. At meal times, the mind should be disburdened, the conscience untroubled, and study, straining the head, business anxieties, and everything that occupies the mind either too intently, or disagreeably, should be avoided. None of the other functions of the body are more completely under the influence of the emotions than those of digestion. The sight and smell of food make the "mouth-water" in anticipation of the sweet morsel to "roll under the tongue," and the pleasant excitement of agreeable associations enhance the enjoyment of eating. On the other hand, distress, fear, or any sudden unfavourable intelligence, exercise an influence directly the reverse. "Dryness of the mouth," as Dr. Russell remarks, "is a symptom of terror, suggesting the expression, 'the tongue cleaves to the roof of the mouth.'"

In India, a thief is detected by desiring him to chew rice in his master's presence; the saliva will not flow from fear, for 'conscience doth make a coward of us all,' and the thief is unable to make any impression upon the dry, hard grain. So much for the importance of recommending social meals, and the obvious risk of throwing an undue amount of labour upon the stomach by bolting food. Possibly this habit, which is said to be so common in America, is one of the causes of the remarkable leanness of that people.* Let, then, meals be taken with pleasant and cheerful companions, or if compelled to eat alone, let some light and entertaining publication become the associate. The aliment received under such pleasurable circumstances, may be expected to furnish in abundance, and in the highest state of perfection, those secretions which are necessary to good digestion.

6th. *General Habits.*—Mental or bodily occupations should not be resumed immediately after a full meal; nor should food be taken without a few minute's pause after exhaustive fatigue. The weary man, whether weary from the sweat of the brow or the sweat of the brain, should rest before he eats. Regularity in the habits of life, such as taking food, sleep, daily fæcal evacuations, exercise, etc., is an important condition in the treatment of dyspepsia. An occasional *change of air*, and place, and scenery, divesting the mind at the same time of its ordinary train of thought, business, or family anxieties, or a gloomy pondering over personal ailments, will exert a wonderful influence, whether in removing or preventing an attack of indigestion. Fortunately, our railway system is now so perfect, and widespread, and withal so economical, that few, by the exercise of a little foresight, need be deprived of so potent an aid to good health.

* "Hints on Diet."

3.—Loss of Appetite (*Anorexia*).

This is generally a symptom of some constitutional derangement of the system, especially of indigestion, disappearing when the cause is removed.

The natural requirements of the body might be neglected to an extent incompatible with its well-being, but for certain sensations—hunger and thirst—which call for fresh sustenance to repair the losses which are constantly taking place. The sensation of hunger depends, no doubt, upon some peculiar condition of the nerves, inducing or removing the feeling of hunger, according as it is agreeable or otherwise. The receipt of alarming or startling intelligence often arrests, in an instant, the keenest appetite. Hunger is much influenced by habit, and returns with great regularity when meals are taken at a uniform hour. Many substances which are non-nutritious destroy or lower the susceptibility of the nervous filaments of the stomach, and thus blunt the natural sensations of hunger; such are, especially, tobacco, opium, and ardent spirits.

CAUSES.—In addition to those mentioned—too little outdoor exercise; irregularity of meals; eating between meals; late hours, etc.

TREATMENT.—When loss of appetite occurs during an acute disease, or a weakened state of the system, it should be respected, as, if food is thrust into the stomach in spite of its dictates, it will generally give rise to more serious symptoms.

China.—When loss of appetite appears to be the only symptom present, this remedy may be administered night and morning, for a few days.

Nux Vomica.—Loss of appetite, with confined bowels, piles, deranged stomach, disturbed or unrefreshing sleep, etc., especially in patients who “fare sumptuously” and take too little out-door exercise.

Arsenicum.—Loss of appetite, with great debility, especially in elderly or feeble persons, or when there is a sinking or burning at the pit of the stomach.

Consult the section on Indigestion.

GENERAL TREATMENT.—Stimulants must be avoided, and water, in moderate quantities, should be the principal drink. The former may excite an artificial appetite, but is often followed by reaction and aggravation of the primary symptoms. Daily ablutions, free ventilation, and moderate exercise taken daily in the open air, are important adjuncts in the treatment.

4.—Voracious, or Depraved Appetite.

These conditions are here classed together, as their treatment is often very similar. A morbid craving for food is generally but a symptom of other disease, or it may sometimes result from an immoderate gratification of the appetite. The remarks on “Loss of Appetite” may be referred to.

TREATMENT.—A remedy may generally be found in the annexed classification :

Excessive appetite in worm affections:—Cina, Silic., Merc., Calc.

In convalescence from disease:—China, Calc., Verat.

During pregnancy:—Nux V., Nat. Carb., Sepia.

Constant hunger:—Staph.

5.—Biliousness.

This is a popular term for various symptoms of indigestion, erroneously supposed to be due to functional derangements of the liver.

SYMPTOMS.—Yellow colour of the skin, fulness and oppression in the pit of the stomach, eructations, loss of appetite, thirst, headache, constipation alternating with relaxation of the bowels, etc.

CAUSES.—The intemperate use of alcoholic beverages, indulgence in the pleasures of the table, or a want of proportion between the food consumed and the active exercise taken.

TREATMENT.—One of the following remedies, according to the particular symptoms, with a restricted simple diet for the following twenty-four hours, and cold water *ad libitum*, will usually complete the cure:—*Nux Vom.*, *Puls.*, *Bry.*, *Merc.*, *Verat.*, or *Ars.*

Nux Vomica.—Suited to patients of sedentary habits, of hasty temperament, with a tendency to constipation or irregularity in the action of the bowels.

Bryonia.—Headache, vomiting, chills, with irritability of temper, especially during *warm weather*, or in persons subject to *rheumatism*.

Mercurius.—Yellow skin; yellow-coated tongue; foetid breath; nausea; loss of, or an inordinate, appetite; pain in the region of the liver, with aggravation of the symptoms at night.

Pulsatilla.—Relaxation of the bowels, especially if fat food has brought on the attack.

Arsenicum.—Severe griping and purging; prolonged vomiting; *burning sensation* in the stomach or abdomen; great exhaustion.

Veratrum.—Severe vomiting, or diarrhoea accompanied by a distressing headache, cold perspirations, and great weakness.

The whole section on “Indigestion” should be consulted.

6.—Spasms or Pain in the Stomach (*Gastrodynia*).

SYMPTOMS.—Severe pinching, gnawing, or contractive pains in the stomach, generally after taking food, often even of the simplest kind and smallest quantity.

CAUSES.—Highly seasoned or indigestible food; the use

of stimulants, coffee, and tobacco; long fasting; exposure to cold or damp; mental emotions, etc. It is but a symptom and effect of indigestion.

TREATMENT.—Chief remedies.—*Nux V.*, *Cocc.*, *Coloc.*, *Acon.*, *Ign.*, *Cham.*, *Camph.*

ACCESSORY TREATMENT.—In severe cases of spasms, two or three folds of flannel, well wrung out of hot water and applied as hot as can be borne; in mild cases, warmed dry flannels.

7.—Heartburn (*Cardialgia*).

This is a disagreeable burning sensation, commencing in the stomach, and extending along the canal between it and the mouth (*œsophagus*), coming on a short time after taking food, and leaving an acrid or scalding sensation at the back of the throat.

CAUSES.—Acid dyspepsia in patients of a gouty constitution and plethoric habit; taking habitually an excess of animal food, or general indulgence in the pleasures of the table; these lead to an excess of acid secretion in the stomach and bowels, which thus usurps the place of urea, and being less soluble, is liable to concrete into gravel or crystals in the bladder.

TREATMENT.—*Nux.*, *Carbo V.*, *Puls.*, *Ars.*, *Sulph.* For the symptoms, see under these remedies in the chapter on “Indigestion,” or the “Materia Medica.”

ACCESSORY MEANS.—The quantity of *ingesta* (food eaten) must be diminished so as to introduce as little nitrogen into the system as possible; greasy kinds of food, stews, twice-cooked meats, raw vegetables, port wine and beer, must be withheld. The healthy action of the skin should be promoted by baths, and frictions by rough towels, for thus much excrementitious and acid matter may be removed from the system. Further, free exercise, short of inducing fatigue,

must be taken in the open air, to give tone to the digestive organs, and by promoting the respiratory functions, more carbonic acid will be thrown off the lungs, and urea, which contains less carbon, will be probably formed in the system, instead of uric acid.

8.—Waterbrash (*Pyrosis*).

SYMPTOMS.—The affection is characterised by frequent eructations of an acid or tasteless watery fluid, sometimes in considerable quantities. It is often accompanied with pain, and is sometimes a symptom of organic disease of the stomach or liver.

CAUSES.—Indigestible, or a too exclusive vegetable diet; it often occurs in persons who are poorly fed.

TREATMENT.—*Nux V.*, *Carbo. V.*, *China*, *Ars.* See the previous section.

9.—Nightmare (*Incubus*).

SYMPTOMS.—The condition thus named includes all kinds of confused, restless, and unpleasant dreams, especially those of a horrible or frightful character. The sufferer experiences a sense of weight or pressure in the chest, impeding breathing, and producing great anguish, or he fancies himself in imminent danger or difficulty, from which he vainly strives to extricate himself, until at length he succeeds in uttering a cry, or moving, when the distressing condition terminates.

CAUSES.—Nightmare may attend various kinds of disorder connected with the digestive organs, but it most frequently follows a late supper, especially if hot or heavy food is taken. It may also be induced by fatigue, or an uneasy position in bed; sometimes the cause is very obscure, and *requires professional treatment.*

TREATMENT.—*Aconitum*.—Feverishness at night; sudden flushes of the face; anxiety and palpitation; oppressed breathing, etc. A few doses at intervals of three or four hours; afterwards one of the following may be administered:—

Nux Vomica.—If the patient indulges too freely in the pleasures of the table, or in stimulating beverages, or takes too little out-door exercise.

Opium.—Indicated in those forms of the disease in which the patient lies in a state of lethargy, and can scarcely be roused, with half-open eyes and mouth, snoring and rattling in the throat, spasmodic breathing, jerking of the limbs, etc.

Puls., *Cham.*, and *Sulph.*, are also useful remedies.

ACCESSORY MEANS.—The exciting cause of the attacks, especially indigestible or excessive quantities of food, must be avoided. Suppers should be discontinued, or consist of very light food taken early, and followed by a little out-door exercise. For patients troubled with night-mare, a glass of cold water is often an excellent substitute for supper. The patient should sleep on a mattress in preference to a soft bed, and the head be moderately well-raised on a pillow. The whole section on Indigestion should be consulted.

10.—Vomiting.

CAUSES.—Improper, or too large a quantity of food; a disordered condition of the digestive functions; disease or irritation in other organs, as the brain, kidneys, uterus, etc.; cancer of the stomach; mechanical obstruction of any part of the intestinal canal; morbid states of the blood; it also occurs in most of the eruptive fevers.

PROGNOSIS.—Nausea and vomiting occurring in diseases of the brain, as in epilepsy, are unfavourable indications; in pregnancy, or hysteria, on the contrary, no alarm need be felt, as they are merely symptomatic of irritation conveyed

by the nervous system to the stomach. We may learn much by observing the time of the occurrence of vomiting, the nature of the matters ejected, and the extent and urgency of the symptoms. If vomiting affords relief, and the nausea, oppression of the chest and stomach, and headache cease, the case may be considered favourable; if, on the other hand, the symptoms preceding vomiting are not relieved by it, but increase, the disease must be regarded as having taken an alarming form.

TREATMENT.—Should vomiting arise from overloading the stomach, or from the use of indigestible food, it should be encouraged by drinking warm water, or tickling the throat with a feather, until the offending material is expelled. In such cases it is truly a conservative act, and should be encouraged within proper limits. Under other circumstances, a remedy may be selected according to the causes which gave rise to the vomiting, and the symptoms which exist. One of the following will often prove efficacious:—

Pulsatilla.—Vomiting from the use of fat food, pastry, or eating too freely; especially when it is attended with dizziness, or looseness of the bowels, and when the smallest quantity of food brings it on.

Ant. Crud.—Nausea, heaviness of the stomach, foul tongue, and dislike to food, which continue unabated after free vomiting.

Ipecacuanha.—Simple copious vomiting, with a disagreeable sickly feeling; also when vomiting is attended with diarrhœa.

Nux Vomica.—Vomiting from the use of strong drink, late irregular hours, with dryness of the mouth, disturbed sleep, and constipation. In the “Morning Sickness” of pregnancy,* this remedy often affords striking and permanent relief.

* For the treatment of “Morning Sickness” in pregnancy, see the “Lady’s Homeopathic Manual.”

Arsenicum.—Vomiting, purging, great prostration, with a burning sensation in the stomach and throat, and coldness of the hands and feet. When caused by cancer or malignant disease of the stomach, it is often relieved by this remedy.

Arnica.—Sickness from a fall or any mechanical injury.

Dose and Administration.—See page 49.

ACCESSORY MEANS.—Small pieces of ice placed on the tongue are very grateful and tend to allay the sickness. The diet must be simple, nourishing, and free from any irritating principle. Beef-tea is, probably, the most suitable form of nourishment, and may be given every one to three hours in small quantities, till other food can be borne. The stomach will often retain a small quantity of bland liquid diet, while it would reject a larger quantity.

11.—Sea-Sickness (*Nausea Marina*).

SYMPTOMS.—These need not be described, as they are too well known by persons embarking for the first time, especially during the early part of the voyage, and when stormy weather prevails. The patient experiences a distressing sense of giddiness, nausea, and uneasiness in the stomach, succeeded by vomiting, first of food previously taken, and afterwards of bilious matter. The retching and vomiting frequently recur, with intervals of extreme physical prostration, a sinking sensation at the pit of the stomach, vertigo, headache, etc. The symptoms, especially the vertigo, are most severe in the upright posture, and are at once relieved by a strictly horizontal posture.

CAUSE.—The motion of the vessel. The seat of the affection is in the brain, and the sickness probably arises from a deficient amount of blood supplied to that organ. Persons of delicate and sensitive organization, with a weak heart, a quick pulse, and a tendency to palpitations, are most liable

to be affected, and are sometimes subject to similar derangement from the oscillations of a carriage, or the movements of a swing.

TREATMENT.—*Nux Vomica*.—As a *preventive*, this remedy should be taken thrice daily for several days previous to embarkation. It will greatly modify, often entirely prevent, sea-sickness, if, at the same time, strict dietetic rules, and other measures afterwards referred to, are observed.

Cocculus.—Indicated when nausea, vomiting, palpitation of the heart, and faintness are prominent symptoms. In cases in which *Nux Vomica* is not admissible, this is an excellent preventive, and may be taken every four hours during a few days before embarkation, and continued a day or two afterwards.

Arsenicum.—Severe and protracted sea-sickness, attended with extreme weakness.

Pulsatilla.—If the odour of the vessel evidently aggravates the uneasy sensation, a few doses of this remedy will often be of great service.

Veratrum.—Extreme weakness and faintness with cold sweats, very feeble pulse, and cramp-like pains in the abdomen and legs.

Petroleum is also recommended for this affection.

ACCESSORY MEANS.—If the previous statement is correct that sea-sickness is caused by an insufficient supply of blood to the brain, our first effort should be an attempt to facilitate the afflux of blood to that organ, by a favourable position, and by imparting strength to the heart's action. The horizontal posture, therefore, should be enjoined, and small quantities of good beef-tea, and small doses of brandy, should be given at short intervals; or, when the symptoms are subsiding and the appetite is returning, a cup of good coffee sweetened with loaf sugar, without milk, with a plain biscuit or a small *slice of toast*, is often grateful.

PREVENTION.—For several days before embarking, the traveller should avoid all indigestible food, overloading the stomach, or any irregularity in diet, and at the same time take one or more of the remedies recommended. During the early part of the voyage he should remain on deck as much as possible, in a recumbent posture, where there is least movement, but avoid looking at the motion of the waves. A girdle, moderately tight, round the waist and abdomen, has also been recommended as a means of obviating or moderating sea-sickness.

12.—Flatulence (*Inflatio*).

It would be unnecessary to devote a separate section to what is only a symptom of *Indigestion*, but that flatulence is so frequent, and often so prominent and persistent a symptom, as to seem to justify a distinctive notice, and requires for its removal one or more of the medicines mentioned in a previous chapter.

CAUSES.—Defective nerve-force, or debility from any other cause; food may be detained in the stomach, and undergo fermentation, or simple putrefactive change, owing to imperfection or arrest of the vital and chemical processes which are constantly in progress in the healthy system. At other times it is apparently secreted by the mucous membrane of the intestinal canal; for the symptoms are very apt to arise in dyspeptic persons when a meal is delayed beyond the accustomed hour, or when the stomach is empty. In some instances, the air is thrown up by eructations, or passed downwards, and is often associated with faintness, nausea, and other disagreeable sensations.

TREATMENT.—*China*.—This is a valuable remedy when the affection follows the use of flatulent food, indulgence in tea, or occurs after drinking beer or water; or in patients who

have sustained debilitating discharges, as in diarrhœa, hæmorrhage, or profuse perspirations.

Cocculus.—*Distension of the stomach*, uneasiness, griping, or flatulent colic.

Nux Vomica.—Flatulence in patients who are troubled with constipation, and particularly if it can be traced to the habitual use of alcohol, coffee, or too little out-door exercise.

Pulsatilla.—Flatulence after the use of rich food, or pork, veal, etc.; or when it arises in persons of a quiet, gentle disposition.

Carbo Veg.—Flatulence when the emissions and discharges are foetid.

Dose and Administration.—See page 49.

ACCESSORY MEANS.—Regularity in the hours of taking meals; a careful exclusion of flatulent kinds of food; and the general measures suggested in the chapter on Indigestion, will usually suffice to remove “Wind in the Stomach.”

13.—Constipation—Confined Bowels.

DEFINITION.—A collection or impaction of excrementitious substances in the rectum, the residuum of the various processes concerned in the nourishment of the body; and occasioning irregularity in the evacuations from the bowel, increase in their consistence, and often a sensation of fulness, tension, and flatulency in the bowel and surrounding parts.

Now, while we admit that such a condition is not desirable, and may almost invariably be avoided by such measures as are pointed out further on, yet a tendency to costiveness is not so prejudicial as many persons suppose it to be; indeed, people thus predisposed generally live long, unless they injure themselves by purgative medicines; while those who are subject to frequent attacks of diarrhœa are soon debilitated, and seldom attain old age. The importance of an

evacuation from the bowels taking place once a day, as nearly as possible about the same hour of the day, is very generally admitted; but the fact is by no means so generally known that more than one evacuation a day is as unfavourable as the former is favourable. But the most erroneous and dangerous idea on this subject is that extremely popular one,—that aperient medicines contribute to health, not only during sickness, but also occasionally in health, inasmuch as impurities are thereby expelled from the body.

The fallacy of this statement may be easily demonstrated: Let purgatives be taken for a week, and however good may have been the state of health previously, at the termination of this period all sorts of impurities will be discharged, especially after taking *jalap* and *calomel*. As this is an invariable result, even in the case of those who have never been ill, it seems to prove that these impurities have been produced by the drugs.

Aperients during sickness, are also most injurious.

“Temporary relief is afforded by powerful purgatives, but the delicate mucous membrane of the intestinal tract is weakened, a sort of chronic catarrh is induced, and the very condition sought to be removed is aggravated tenfold” (*Habershon*).

The unphilosophical practice of resorting to purgatives is well put by Dr. Yeldham, who argues that as disease weakens the whole system, so

“The bowels, in common with the legs, the arms, the stomach, the brain, and every other organ, partake of the general debility, and become deprived of that power by which, in a state of health, they are enabled to discharge their proper functions. Why, then, should they, more than the other organs, be impelled to the performance of a duty to which, at the time, they are totally unequal?”

“Again, under the process of disease, the whole vital power is devoted to the struggle which is going on in the affected part. The attention of the system is, as it were, drawn off as well from the bowels as from every other organ not immediately engaged in the contest. On this account

also they remain quiescent; and any interference with that quietude, by diverting the vital energy, weakens that force which nature requires to be undivided, to enable her to conduct her combat with disease to a successful issue—an additional reason why purgatives should be avoided. Constipation is an *effect*, not a *disease*. If it were, there might be some show of reason in the use of aperients. But being merely a temporary loss of power, we can no more restore that power by *forcing* the action of the bowels, than we can impart strength to a weakened leg by *compelling* it to walk. In the latter instance, we should instinctively rest the part, until, by the removal of the disease, motion might be resumed. The same reasoning applies with equal force to the removal of constipation. The exercise of a little patience, and the employment of judicious means for the eradication of that disordered condition on which the inaction depends, will as infallibly restore the bowels to their duty, as in every other instance the effect must cease when the cause is removed.*

SYMPTOMS.—The following are associated with, or follow, constipation:—Headache; feverishness; pressure or distension in the stomach and bowels; pulsation or pain in the abdomen; piles and varicose veins; uneasy breathing; disturbed sleep; depression of mind, etc. If constipation is a persistent symptom it may be attended with vomiting, and by repeated but fruitless efforts to evacuate the contents of the bowel.

CAUSES.—*Sedentary habits*; dissipation; an improper quality or quantity of food; the use of *superfine flour*; neglect in attending to the call of nature to relieve the bowels; mental anxiety; diseases of the liver; derangement of the digestive organs, inducing diminished contractile power in the coats of the rectum; mechanical obstruction preventing the progressive motion of the contents of the tube; inflammatory disease of the intestines, brain, or spinal cord, or their membranes. But a frequent cause of constipation is the loss of tone of the mucous lining of the bowels, produced by the habitual use of purgatives, a prac-

tice so baneful and wide-spread as to justify a distinctive notice.

PURGATIVES.—Purgation produced by drugs is an *unnatural condition*, and although relief often follows the use of aperients, they tend to disorganize the parts on which their force is chiefly expended. The intestinal canal is not a smooth tube, through which can be forced whatever it contains without injury; it is part of a *living* organism, and needs no force to propel its contents on their way; nor can such force be applied with impunity. Not only does the frequent use of purgatives over-stimulate the liver and pancreas, but also especially the numerous secretory glands which cover the extensive surface of the intestinal canal, forcing them to pour out their contents in such excessive quantities as permanently to weaken and impair their functions, and so produce a state of general debility. The normal action of the stomach and intestinal canal being thus suspended, nausea, vomiting, griping, and even fainting are produced. The brain and vital energies are disturbed, occasioning lowness of spirits with melancholy, alternating with mental excitement and peculiar irritability of temper. But the most serious result of purgatives is the destruction of the mucous membrane that lines the whole intestinal canal, thus leading to the impairment of the functions of digestion, and resulting sooner or later in ulceration of its surface, with a long train of evils. Experience has sufficiently demonstrated that the ultimate effect of all purgatives is aggravated constipation.

An important end will be gained when we can induce persons to regard constipation as a mere result of other causes, and a want of balance in the general system, and when our general and remedial measures shall be directed to the correcting of this condition as the only adequate means of curing constipation.

TREATMENT.—When constipation is accompanied with headache, dry or parched tongue, hot skin, or gives rise to local suffering from the evacuation of hardened fæces, a remedy may be selected from the following list. These remedies, let it be observed, are not intended merely to *act* upon the bowels, but to correct derangements of the system upon which the constipation depends.

Constipation from sedentary habits.—Nux., Bry., Lyc., Opi., Sulph.

Following diarrhœa.—Ant. C., China, Nux., Opi.

During pregnancy.—Alum., Bry., Lyc., Nux., Sep.

Chronic constipation.—Lyc., Sulph., Plumb.

In aged persons.—Opi.

With piles.—Nux., Sulph.

In children, with large and bulky stools.—Alumina.

Bryonia.—Constipation in *warm weather*, from a *deranged stomach*, with chilliness, headache, pain in the region of the liver, irritation; also in persons having a tendency to chills and rheumatism.

Nux Vomica.—Constipation occurring in connexion with other affections; habitual constipation, with frequent ineffectual efforts to stool; also with nausea, headache, ill-humour, and uneasy sleep. It is especially useful when it follows over-repletion of the stomach or indigestion, the use of intoxicating drinks, tobacco, or coffee; and for persons who take too little out-door exercise.

Opium. — Chronic constipation, especially after other remedies have been administered unsuccessfully; also in recent cases of constipation. It is particularly indicated when the motions are hard and lumpy, and when there exist headache, drowsiness, dizziness, congested face, and retention of urine. *Opium* is well adapted to the aged, and to persons of a torpid or plethoric temperament, who do not respond to the action of the remedies, as it seems to call into activity *the slumbering energies*.

Lycopodium.—Constipation with rumbling and flatulence; fulness and distension of the abdomen; heartburn; eructations; stools passed with difficulty, the first portion being hard or knotty, and followed by soft fæces; pain, contraction, stitches, or burning in the rectum.

Plumbum.—Obstinate cases, either painless, as from palsy of the intestines, or attended with severe colic, particularly about the navel (hot fomentations being applied at the same time); unsuccessful efforts to evacuate, with a painful, constricted feeling about the anus. For persons of a paralytic diathesis, and particularly in such as have had attacks of palsy, epilepsy, emaciation, or dropsy, it is strongly indicated.

Podophyllum.—Constipation, with headache, flatulence, and chronic prolapse of the anus; pain in the right side (liver); constipation with prolapsus of the uterus.

China.—Constipation resulting from debilitating discharges, such as in miscarriage, violent or prolonged diarrhoea, etc.

Ignatia.—Confined bowels, with *prolapsus* of the rectum on slight efforts to evacuate; creeping, itching sensation in the rectum, as of thread worms.

Sulphur.—Habitual costiveness, with flatulent distension of the abdomen, piles, etc. As an intercurrent remedy it acts like *opium*, but having a wider sphere of action, and being useful in numerous forms of disease, it is an agent of far greater value.

ADMINISTRATION.—In recent cases, every four hours; in chronic, once or twice a day.

DIET AND ACCESSORY MEASURES.—These are of the greatest importance, for unless followed, no medicines can be of permanent benefit. Walking exercise, with the mind unencumbered with business or family cares, is useful, particularly in the morning in the country; but it should

not be carried to the point of inducing fatigue or much perspiration. Water* is an extremely valuable adjunct, both for internal and external use. Strong or green tea, all spirituous liquors, highly-seasoned food, and late suppers should be strictly avoided.

Meals should be taken with regularity, animal food sparingly, and vegetables and ripe fruit eaten freely. Coarse oatmeal porridge, with treacle, may be taken for breakfast; and *brown bread should always be preferred to white.*

The last recommendation is of so useful a character as to demand a moment's further consideration. We obtain a considerable quantity of fat in the principal grains employed in making the various kinds of bread, and it is of importance to know the proportion in which it exists in the different varieties of breadstuffs, for upon the amount of fat seems to depend the laxative or binding properties of these articles upon the intestines. Professor Johnson gives the following proportions :—

| | |
|------------------------------------|-------------|
| In fine English wheaten flour | 2 per cent. |
| In bran of English wheat | 6 „ |
| In Scotch oatmeal | 6 „ |
| In Indian corn | 8 „ |

“From this table,” Dr. Russell remarks, “we learn that fine wheaten bread contains only one-third the quantity of oil that oatmeal or bread made of wheat-meal does; and we may derive a useful hint from this in the management of cases attended with constipation. It was generally supposed that the bran acted as a foreign body upon the mucous membrane, and that from the irritation it produced the peristaltic action was increased. This may be partly true, but the presence of the oil is undoubtedly conducive to the greater activity of the bowels. Rice contains very little fat,

* See article, “Water,” pages 16—18.

and hence its constipating tendency. Indian corn, on the other hand, is very rich in fat, and might probably be more extensively used in this country with advantage. All travellers in America dwell with much gusto on the delicious cakes of Indian corn that are served up at breakfast. See also the article on "brown bread," pages 11—13.

FRICTIONS over the abdomen are frequently of great utility; they tend to rouse the paralysed action of the bowels, and to dispel accumulations of flatulence. The frictions may be performed by towels, horse-hair gloves, or with the hand.

ABDOMINAL COMPRESS.—This consists of two or three thicknesses of linen from about six to nine inches wide, and long enough to go round the whole body, or the linen may only cover the front part of the abdomen, or even only the seat of uneasiness; this should be well wrung out after immersion in cold water, and, when applied, covered with oiled silk or india-rubber cloth to keep in the heat and to prevent too rapid evaporation of the fluid, and secured by flannel or linen and with strings so as to keep it in *close apposition* with the part which it covers. This may be worn several nights in succession, the parts being well sponged with cold water and rubbed with a coarse towel on removing it in the morning. In obstinate cases, the compress may be worn night and day for several days, observing to re-wet it whenever it becomes dry. This application is only contra-indicated in aged and weak persons, in whom there does not exist vital energy sufficient to excite reaction, and the wet linen continues to feel cold long after it has been applied. In other cases, the chill produced by the sudden application of the wet cloth rapidly disappears, and in from five to twenty minutes a comfortable warmth results, proving its suitability to the patient.

REGULAR HOUR.—Too much importance cannot be attached

to *regularity* in attending to the calls of nature, as there is probably no function of the animal economy more completely under the influence of habit, than that of defecation ; nor, on the other hand, is there any function that may be more effectually deranged through the influence which the will can oppose to it. The best time for visiting the water-closet, whether nature is urgent or not, is in the morning, generally after breakfast. By fixing the mind on this operation for a short time, the bowels will at length respond, and a habit become established which will tend to procure both comfort and health.

INJECTIONS.—In obstinate and protracted constipation attended with feverishness and hardness or fulness of the bowels, and when it is ascertained that the lower bowel is obstructed with faecal matter, in too large masses, or too hard and dry for discharge, and the means before suggested have not proved at once effectual, the enema may be used as an almost certain means of obtaining the desired relief. The injection should consist of about half a pint to a pint of cold or tepid water, which should be carefully injected up the rectum by means of the enema syringe. The temperature of the water on commencing the use of injections should not be lower than 72° Fahr., and gradually reduced to 64°. Unirritating in its operation, and acting directly on the seat of obstruction, an injection is far preferable to deranging the whole alimentary tract with strong drugs, which excite violent action only to settle back into a state of greater debility and torpor than before.

14.—Colic (*Enteralgia*).

This disease generally affects the large intestines, and consists of pain arising from a violent contraction of the muscular fibres of that portion of the intestinal canal.

SYMPTOMS.—Severe twisting, griping pain around the

navel, which is relieved by pressure, so that the patient is found sitting doubled up, lying on his belly, or rolling on the floor, writhing in agony. The bowels are generally constipated, but there is a frequent desire to relieve them, although nothing passes but a little flatus; there is no fever, nor is the pulse even quickened, unless after a time it may become so from anxiety. The paroxysms of pain are owing to the efforts of the bowel above to force downwards the mass of accumulated gas and fæces.

DIAGNOSIS.—Colic may be mistaken for *Enteritis* (inflammation of the bowels), as both are characterised by confined bowels, pain in the abdomen, especially about the navel, which is often relieved by the expulsion of wind, and, frequently, vomiting. It is important, however, to note in what respects these diseases *differ*. In colic, there is no fever, no acceleration of the pulse, no serious apprehensive anxiety, the pain is relieved by pressure, and there are intervals of almost complete relief. *Enteritis*, on the other hand, is attended with fever and extreme tenderness of the abdomen, causing the patient to avoid any movement which would bring into action the abdominal muscles, so that he breathes by the chest alone; and, although there are *paroxysms* of severe pain, there are no complete intermissions. Colic may be distinguished from *hernia* or *rupture*, by the tumour which exists in the latter disease, but which is absent in the former.

CAUSES.—Errors of diet, such as eating a mass of heterogeneous, acrid, indigestible food, or acid fruits; cold from wet feet; suppressed perspiration; worms; constipation, etc. It may also arise from stricture of the intestines (*intus-susception*).

TREATMENT.—The chief remedies are, *Coloc.*, *Verat.*, *Bry.*, *Nux.*, *Ars.*, *Cocc.*, *Merc.*, *Bell.*, *Cham.*, *Puls.*, *Plumb.*

Colocynth.—Violent pains compared to stabbing, cutting,

clawing, or squeezing, and are constant, or recur with increased intensity. There is great tenderness of the abdomen, and the pain, so excessive as to cause the patient to scream, is often limited to one spot.

Veratrum.—Severe *crampy pains* in the stomach or abdomen; flatulent colic, especially in the night; colic affecting the whole abdomen, with swelling, or loud rumbling.

Bryonia, in less severe forms of the disease, when in addition to fulness and distension of the bowels, there are sharp stitching pains in the sides or in the bowels, and irritability of temper.

Plumbum.—As may be inferred from the action of *lead* upon the bowels in a state of health, whether introduced into the blood through the stomach or skin, the homœopathic practitioner will recognise its value in many varieties of colic, avoiding of course, its use in that form which has been caused by the poison of lead. The symptoms which indicate this remedy are,—violent constrictive shooting or pinching pains in the region of the navel; constant desire to eructate and expel flatus; torpor, numbness, stiffness, and weakness in the limbs; pressure and cramps in the stomach; obstinate constipation; face and skin pale, bluish or yellow; cold extremities; melancholy, etc.

Nux Vomica.—Colic from indigestible food, cold, suppressed period, or during pregnancy, with fulness and tightness in the region of the stomach; severe pinching and cutting pains; and pressure towards the lower part of the abdomen; constipation, or constipation alternately with relaxation; windy colic, etc.

Chamomilla.—Tearing pains around the navel; great restlessness; accumulations of saliva in the mouth; diarrhoea, the motions being green, watery, or mixed with mucus. It is well suited to children and females, during excitability and irritation of the nervous system. In persons of a very *mild disposition Pulsatilla* may be substituted.

Administration and Dose.—See page 49.

ACCESSORY MEANS.—Hot flannels over the abdomen, or a copious enema of warm water, perhaps two pints, is often followed by immediate relief. If necessary, the injection may be repeated. Food of a flatulent character, and every kind that has been found to disagree with the patient, must be avoided. Persons subject to colic may be benefitted by wearing a piece of flannel around the abdomen, and having the feet well protected from damp.

15.—Painters' Colic—Lead Colic.

SYMPTOMS.—In addition to those mentioned under *Colic* there are twisting pains around the navel, retraction of the muscles of the abdomen towards the spine, pain in the back, and, sometimes, paralysis of the extremities. This last condition is very characteristic; the extensor muscles of the hand and fingers are paralysed, and, when the arms are extended the hands hang down by their own weight, the patient having no power to raise them. The common expression, *drop wrist*, well describes this condition. The palsy is at first local, till by persistence in their occupation, patients fall into a state of general cachexia, become miserable cripples, and, eventually, sink under disease of some vital organ. A most valuable diagnostic sign of lead colic is the existence of a blue line round the edges of the gums.

CAUSE.—Exposure to the action of lead; it is chiefly met with in painters, who use white lead in the preparation of their colours; it also occurs in other persons whose employments bring them into frequent contact with preparations of lead. That variety of paint which is to give a dead or non-glistening surface is the most poisonous from its being mixed with a large quantity of turpentine, which, passing off by evaporation carries with it a portion of the lead, which

is then inhaled or mixed with the saliva, is received into the stomach, or again, settling on the skin is absorbed.

TREATMENT.—*Opium, Bell., Sulph. Ac.* (See the preceding article.)

ACCESSORY MEANS.—The following cautions, by Dr. Watson, are of great practical importance.

“1. To prevent its introduction through the skin, minute attention to *cleanliness* is necessary. The face and hands should be washed, the mouth rinsed, and the hair combed several times in the day; and bathing and ablution of the whole body should be frequently performed. Also the working clothes should not be made of woollen, but of strong compact linen; and they should be washed once or twice a week at least, and worn as little as possible out of the workshop; and some light impervious cap might protect the head while the workman is at his labour.

“2. Care should be taken that none of the poison be admitted into the system *with the food*. The workmen, therefore, should not take their meals in the workroom, and should be scrupulous in cleansing their hands and lips before eating.

“3. The entrance of the poison into the air-passages during respiration should be guarded against as much as possible. Masks have been recommended for this purpose; none probably would be more convenient or more effectual, than Mr. Jeffrey's orinasal respirator.”

16.—Diarrhoea—Looseness of the Bowels—Purging.

DEFINITION.—The condition called diarrhoea or purging, consists of frequent, abundant, and liquid evacuations from the bowels, without straining or inflammation of the parts; it may arise from functional or structural changes in the small intestines from local or constitutional causes.

FORMS AND SYMPTOMS.—There are many forms, but we shall only mention the following: *Irritative diarrhœa*, from excessive, stimulating, irritating, or impure food or drink; *Congestive or inflammatory diarrhœa*, from cold, cold drinks or ices when the body is overheated, checked perspiration or suppressed accustomed discharges; *Summer diarrhœa*; *Diarrhœa lenterica*, or discharges of unaltered food from arrest of the digestive and assimilative functions. The most common symptoms are nausea, flatulence, griping pain in the bowels, followed by loose motions of an unnatural character, which may vary as regards *consistence*, being watery or fluid; in their *nature*, being slimy, bilious, or bloody (*dysentery*); also as to their *odour* and *colour*. There are generally superadded, a furred tongue, foul breath, and acrid eructations. The circulation, breathing, and other functions are usually unaffected. In summer diarrhœa, or English cholera, the discharges are chiefly bilious, and there are often violent pains in the abdomen, cramps in the legs, and great prostration.

CAUSES.—1. *Excess in the Pleasures of the Table*.—Over-repletion of the stomach may occasion irritation and diarrhœa by the mere quantity of the aliment introduced, but these results much more frequently follow the *mixture* of various kinds of food and drink in one meal, each of which, separately, might have been well borne by the stomach, and have contributed to the nourishment of the body.

2. *Impure Water*.—This is a fruitful cause of diarrhœa. Water contaminated with sewage or sewage gases, or with decomposing animal matter, is almost certain to occasion diarrhœa, especially in recent visitors to a neighbourhood supplied with such water. The general existence of diarrhœa in a district should suggest the importance of submitting the water used for drinking or for cooking purposes to competent examination.

3. *Indigestible kinds of Food.*—Such are, especially, sour, acid, unripe, or decaying fruits or vegetables; badly-cooked food; various kinds of shell-fish; *putrid* or *diseased* animal food. Numerous proofs are furnished in the public journals that the flesh of animals slaughtered in a state of disease is extensively sold for human food. The following statement will suggest great caution as to the selection and purchase of animal food, and may serve as an explanation of frequent attacks of diarrhoea.

Mr. Gamgee, who was recently appointed by the Lords of the Privy Council to institute a full inquiry into the subject of diseased animal meat as used for human food, and to visit any of the markets and slaughter places in the United Kingdom to collect all necessary information, issued his report, from which we make the following extract:—He finds that

“Disease prevails very extensively in the United Kingdom amongst horned cattle, sheep, and swine; that the diseased state of an animal not only does not lead the owner to withhold it from being slaughtered for consumption as human food, but, on the contrary, in large classes of cases, where the disease is of an acute kind, leads him to take immediate measures with a view to this application of his diseased animal; and that, consequently, a very large proportion, perhaps a fifth part, of the common meat of this country—beef, veal, lamb, mutton, and pork—is derived from animals considerably diseased. Horned cattle affected with pleuro-pneumonia are much oftener than not slaughtered on account of the disease, and when slaughtered are commonly eaten, though the lung-disease shall have made such progress as probably to taint the carcase. Animals attacked by ‘foot and mouth disease’ are not often slaughtered on account of it; but if they should happen to be slaughtered, are uniformly employed as food. Animals with ‘anthracic and

anthracoid disease' are, with the exception of the gangrenous parts, very extensively used; and the presence of parasites in the flesh of an animal never prevents the owner from selling it as food. Carcases, too obviously ill-conditioned for exposure in the butcher's shop, are sent in abundance to the sausage-makers, and are also 'pickled' and 'dried;' and though specially diseased organs are generally thrown aside by most sausage-makers, some will even utilise the most diseased parts that they can obtain. Finally, in connection with some slaughtering establishments, pigs—destined themselves to become human food—are habitually fed on the offal and refuse of the shambles, and consume, with other abominable filth, such diseased organs as are below the more conscientious sausage-makers' standard of proper condition!"

When diarrhœa is caused by eating such kinds of food, it may well be regarded as a conservative action, by which the system endeavours to rid itself of deleterious or poisonous materials.

4. *Atmospheric Influences*.—The heat of summer, the hot days but chilly nights and mornings of autumn, are frequent exciting causes of diarrhœa; so is the application of cold to the perspiring body, or the sudden checking of perspiration. Hot weather is a frequent exciting cause of diarrhœa, termed, on this account, summer or English cholera. Dr. Farr says that diarrhœa "is as constantly in English towns when the temperature rises above 60°, as bronchitis and catarrh when the temperature falls below 32°." Probably to the influence of the change of temperature, from the excessive heat of the day to the cool of the evening in the autumnal months, may be added bad drainage, and the impurities of our rivers and springs which then exist.

5. *Mental Emotions*.—The depressing influences of fear, or the violent excitement of anger, are frequent exciting causes. A sudden fright or fear excites in many persons the

action of the bowels as certainly as, and much more quickly than, a black draught.

6. *Diarrhœa is often a symptom of other diseases*, as hectic and phthisis, when it is called *colliquative* diarrhœa, because it appears to *melt down* the substance of the body; the diarrhœa of typhoid fever; *cachectic* diarrhœa, as from chronic malarious diseases; bilious diarrhœa, from excessive flow of bile, as in hot weather or after passing a gall-stone. Looseness of the bowels is also a very common precursor of cholera, when that disease is epidemic.

TREATMENT.—In the treatment of constipation we have discouraged the use of aperients, both on account of the injury they occasion, and their failure of producing anything beyond a brief palliation. In like manner, the attempt to arrest diarrhœa by the astringent measures of the old school has, in many ways, a most prejudicial effect; for should one symptom be relieved, it is too frequently followed by aggravation of others. When loose evacuations afford relief to a patient, they should not be interfered with, for in such cases they are Nature's mode of curing disease. The evacuations following the too free indulgence of the table, or those of children during teething, are of this class. It is well, therefore, in almost every instance, to pause awhile, or only resort to medicines when the disease continues so long as to be evidently injurious.

Diarrhœa from improper food.—Ant. C., Ipec., Puls., Nux.

Diarrhœa from fruits or acids.—Chin., Ars., Puls.

Diarrhœa in hot weather.—Camph., Bry., Dulc., Merc., Chin.

Diarrhœa with colic.—Coloc., Merc., Ars., Bry., Cham., Verat., Dulc., Nux V.

Diarrhœa with vomiting.—Ant. Crud., Ars., Ipec., Ver.

Diarrhœa with discharges of blood.—Ipec., Capsicum, Rhus Tox., Merc. Cor.

Bilious or mucous diarrhœa with griping.—Merc., Puls., Dulc., Bry., Nit. Ac., Ipec.

Diarrhœa during dentition.—Cham., Merc. Sol., Rheum, Cina, Calc. C.

Chronic diarrhœa.—Calc. Carb., Phos. Ac., Secale, Sulph.

Diarrhœa from mental causes.—Cham., Ign., Coff., Coloc.

Relaxation with frequent daily evacuations.—Calc., Kreasotum, Nit. Ac., Phos., Sulph.

Diarrhœa in weak persons.—Chin., Ferr., Sec., Phos. Ac.

Hectic diarrhœa.—Calc., Sulph., Nit. Ac., Ars., Ferr., Chin.

In aged persons.—Ant. C., Bry., Phos., Sec.

Diarrhœa from worms.—Merc., Cina, Ferr., Calc. C.

Camphor.—In sudden and recent cases, with chilliness, shivering, cold creeping of the skin, severe pain in the stomach and bowels, cold face and hands, or cramps in the legs or stomach. Two drops on a small piece of loaf sugar, repeated every twenty or thirty minutes, for three or four times; afterwards at longer intervals. For the general indications for this remedy, consult the *Materia Medica*, article, “*Camphor.*”

Dulcamara.—Diarrhœa traceable to cold, particularly in the summer or autumn; when the evacuations take place at night, and are slimy, bilious, or greenish, and attended with sickness; colic, and griping round the navel; impaired appetite, and dejection of spirits.

Ant. Crud.—Watery diarrhœa, with disordered stomach, loss of appetite, white-coated tongue, eructations, and nausea. It is more especially indicated in aged persons; females during pregnancy, or after accouchement; also in some cases of diarrhœa during dentition.

Bryonia.—Diarrhœa during the heat of summer, especially if caused by cold drinks, or a fit of passion, vexation, etc. It may often be used successfully after *Cham.* has proved inefficient.

Mercurius Cor.—Watery, slimy, bilious, or bloody stools, preceded by colic and griping, and followed by painful straining, called *tenesmus*.

Chamomilla.—Watery, bilious, or slimy stools, of a yellowish, whitish, or greenish colour, *particularly in children*; discharge of undigested food (*lientery*); restlessness, rumblings, or pain of a tearing kind in the bowels; fulness and hardness of the stomach; thirst, coated tongue, and disagreeable taste in the mouth.

Pulsatilla.—Purging from fat and rich food, with slimy, bilious, or watery stools, which have a foetid odour, and excoriate the anus; the patient complains of bitter taste in the mouth, nausea, eructations, and colicky pains, especially at night.

China.—Diarrhœa of a greatly prostrating character, especially after eating, or in the night, and containing undigested food, with colic; or painless diarrhœa, with debility, thirst, and loss of appetite.

Veratrum.—Cutting, griping pains, cramps, vomiting, rapid sinking; coldness of the body; evacuations of a thin, watery character, especially the “rice-water evacuations,” attended with symptoms resembling those of cholera. Recourse may also be had to this remedy if any of the above fail to produce relief in twenty-four hours.

Phosphoric Acid.—Exhausting, painless diarrhœa, particularly when there is involuntary action of the bowels.

Arsenicum.—Diarrhœa accompanied or ushered in by vomiting, with great heat in the stomach; and a *burning sensation* attending the effort of expelling the motions, with griping or tearing pains in the abdomen. It is well indicated in cases marked by extreme weakness, emaciation, coldness of the extremities, paleness of the face, sunken cheeks, etc.

Calcareæ Carb.—Chronic diarrhœa, with weakness, emaciation, pale face, and sometimes excessive appetite. It is *especially useful in scrofulous children*.

DIET.—In recent cases of diarrhœa, food should be given sparingly, consisting of light, non-irritating articles—gruel, rice, arrowroot, and other farinaceous substances, which should be taken *cool*. In chronic diarrhœa, the diet should be nutritious, but restricted to the most digestible kinds of food—mutton, chicken, pigeon, game, and white fish are generally suitable, if not overdone. Beef, pork, and veal, and all tough portions of meat should be avoided. Starchy foods—arrowroot, sago, etc., are insufficient for prolonged cases of diarrhœa, but are improved by admixture with good milk. *Old* rice, well cooked, with milk, taken directly it is prepared, is excellent nourishment, if it agrees with the patient. Raw or half-cooked eggs, and wholesome ripe fruits in moderation, may generally be taken. Mucilaginous drinks—barley-water, gum-water, nitric lemonade, linseed tea, etc., are the most suitable. See “Domestic Accessories,” pages 190-2.

ACCESSORY MEANS.—The extremities should be kept warm, and exposure to cold or wet avoided. Rest, in the recumbent position, is desirable. Severe griping pains may be relieved by warmed flannel, or flannel heated by immersion in hot water applied to the abdomen. Individuals liable to diarrhœa, and having a feeling of coldness about the abdomen, should wear flannel waist-belts. Night air and late hours predispose to attacks. Except in severe cases, moderate out-door exercise should be taken daily. On recovery from diarrhœa, relapses should be guarded against, by shunning all exciting causes, as in food, clothing, etc.; mental excitement and excessive or prolonged exertion should be avoided.

17.—Dysentery (*Dysenteria*)—Bloody-Flux.

DEFINITION.—This is a specific febrile disease, consisting of inflammation and ulceration of the minute lenticular and tubular glands of the mucous membrane of the large intestine, attended with *tormina* (severe griping pains), followed by *tenesmus*, and scanty *mucous* or *bloody* stools.

HISTORY.—Dysentery being an attendant upon war, a practice both old and universal, it was well known to the most ancient writers on medicine. It has attended and been the scourge of all the great armies which have traversed Europe during the last two hundred years, being particularly fatal in all unsanitary camps and garrisons. “It is the disease of the famished garrisons, of besieged towns, of barren encampments, and of fleets navigating tropical seas, where fruits and vegetables cannot be procured. During the Peninsular war, the first Burmese war, and the late war with Russia, *dysentery* was one of the most prevalent and fatal diseases which reduced the strength of the armies.”

Even in England, before the sweeping changes which have followed in the wake of the sanitary reformer, it was as frequent and as fatal as it is now in unsanitary tropical countries. To the higher degree of civilization we enjoy, including in its train well-constructed, well-ventilated, and well-lighted dwelling-houses and streets, a more general and perfect system of drainage, with an abundant supply of good water, temperate and cleanly habits of the population, and enlarged general information on the laws of health, we may in truth ascribe our present comparative exemption from dysentery and analagous diseases.

SYMPTOMS.—These vary considerably with the type of the disease. Simple cases occur, and run their courses, with little constitutional disturbance; but an acute attack commences with a chill or rigor, and is soon followed by fever,

the pulse being quick, the skin hot, the face flushed, and often pain in the head, thirst, furred tongue, nausea and vomiting. Gripping, irregular pains in the abdomen, called *tormina*, are experienced, and the patient is often tormented by a sensation as if there were some excrementitious matter in the bowel ready to be evacuated, and he is irresistibly impelled to strain violently to remove the irritation. This, the most marked symptom of dysentery, is called *tenesmus*, and although the desire to go to stool is frequent and urgent, the patient is unable to pass anything except a little mucus and blood, shreds of fibrine which the patient often thinks to be the coats of his own bowels, and, sometimes, balls of hardened fæces, called *Scybala*. In hot climates its attacks are acute and violent, the pain being very severe around the navel and at the bottom of the back-bone. The bladder often sympathises with the rectum, exciting frequent efforts to pass water. In unfavourable cases, these symptoms are followed by loss of strength and flesh, very small and rapid pulse, anxious and depressed countenance, the abdomen becomes increasingly tympanitic, with bearing-down of the lower bowel, burning heat, hiccough, sudden cessation of pain, cold sweats, sharpened features, delirium and death. In favourable cases, the strength is not much reduced, while warmth and moisture of the skin, and a more natural character of the evacuations, indicate a tendency to recovery.

CAUSES.—“I believe dysentery to be caused by the action on the blood of a poison having a peculiar affinity for the glandular structures of the large intestine. This poison I believe to be a malaria generated in the soil by the decomposition of organic matter” (*Macleay*). It is probable, therefore, that the following are efficient agents in the *propagation*, rather than in the *causation* of dysentery:—Exposure to extreme and sudden changes of temperature, as from heat of day to the cold and damp of night; impure water;

insufficient protection from cold and wet, as sleeping on the ground with the abdomen insufficiently covered; intemperance; a poor or irregular diet, etc. It is therefore often epidemic among people reduced by privation, particularly soldiers in camps, and in India, the Chinese sea, and other hot climates.

TREATMENT.*—*Prompt* treatment is of great importance, as the disease often progresses rapidly, and may produce irreparable mischief.

Aconitum.—If febrile symptoms are well marked, the early use of this remedy often arrests the disease at its onset. It should be administered several times, at intervals of an hour. Afterwards, if required, one of the following:

Mercurius Corrosivus.—Bloody evacuations, or mucus mixed with blood, or dark, bilious, foetid, discharges; severe pain and straining before, and still more so after, a discharge, as if the bowels would be jerked out; violent colic, debility, trembling, and cold sweat on the forehead.

Colocynth.—This remedy is often required after *Mercurius*, especially when the colicky pains occur periodically, are very severe, and when the abdomen is distended, the tongue coated white, and the discharges are slimy and bloody, and mixed with green matter or lumps.

Arsenicum.—Burning pain with the evacuations; excessive weakness; coldness of the extremities; cold breath; putrid and offensive fæces and urine, often passed involuntarily. It is especially indicated in nervous and dropsical patients, and in constitutions enfeebled by previous disease.

Ipecacuanha.—Autumnal dysentery, with nausea and vomiting, great uneasiness, straining, and colic; the evacuations are green, frothy, foetid, and afterwards bloody mucus. This

* Dr. Teste recommends *Ipecacuanha* and *Petroleum*, in alternation, as curative of dysentery under all circumstances. In case of intense fever, one or two doses of *Acon.* to be first administered.

remedy is often administered advantageously in alternation with *Bryonia*.

China.—Dysentery in marshy districts; putrid and intermittent dysentery.

Rhus Tox.—Involuntary nocturnal discharges; cutting pains in the abdomen; almost constant urging to stool.

Sulphur.—Obstinate cases, where ordinary remedies fail in affording relief, especially where there is constitutional taint, or hæmorrhoidal disease; also as an intercurrent remedy.

Administration.—In urgent cases, a dose every twenty minutes, half-hour, or hour; in less severe cases, every three or four hours.

CHRONIC DYSENTERY.—*Phos.*, *Nit. Acid.*, *Rhus*, *Sulph.*, *China*, *Calc. C.*, *Verat.*, and *Phos. Ac.*, are our chief remedies.

ACCESSORY MEANS.—The patient should remain in bed, and in severe cases use the bed-pan instead of getting up. A flannel wrung out of hot water should be applied over the abdomen, covered by a dry one, and renewed when it becomes cold, a second hot flannel being ready when the first is removed. The drink should consist of cold water, toast-water, gum-water, barley-water, etc.; the diet must be restricted to cold milk, previously boiled, and bread, arrow-root, pure cocoa, broths, ripe grapes, and other liquid forms of food. Animal food and stimulants should be avoided till recovery has considerably advanced, except in cases unattended by fever, when beef-tea and other animal broths may be taken. Cold, or sudden changes of temperature, should be particularly guarded against. The most decided benefit often results from the employment of injections, if there be not too much inflammation to admit of the introduction of the injection tube. They may be administered after each evacuation, if they prove beneficial. The first two or three injections may consist of from half a pint to a pint of tepid water, the temperature being afterwards

gradually reduced. Mucilaginous injections are also frequently of service.

PREVENTION OF DYSENTERY.—The following passage is important and suggestive :

“The remarkable decline of dysentery in this metropolis has been contemporary with that of some other severe disorders, and is due to the ~~same~~ combination of causes. For nearly two centuries we have had no ~~plague~~ among us. *Agues*, formerly very rife in London, have almost disappeared. *Continued fevers*, which used to break out annually in hot weather, are comparatively unfrequent. I believe that we may trace ~~these~~ great blessings to an event which was regarded by many, at the time, as a national judgment—I mean the great fire that, in 1666, consumed everything between Temple Bar and the Tower. The streets and houses thus destroyed had been filthy in the extreme, close, densely crowded, and consequently most unhealthy. The impurity of the air excited, perhaps, some maladies, and it certainly predisposed those who dwelt in it to various kinds of disease, ‘the seeds of which,’ says Dr. Heberden, ‘like those of vegetables, will only spring up and thrive when they fall upon a soil convenient for their growth.’”*

18.—Asiatic Cholera.

DEFINITION.—An epidemic disease of great and rapid mortality, characterised by premonitory diarrhœa, vomiting and purging of a watery fluid, collapse with extreme depression of all the functions of life, coldness and dampness of the surface of the body, cold breath, craving thirst, suppression of urine, sunken countenance, etc., terminating in death, or reaction, leaving various dangerous sequelæ.

In this disease, which resists the efforts of the old system, Homœopathy has won brilliant and undying triumphs. The success of our new system in the prevention and cure of cholera, and other violent diseases, has contributed greatly to its rapid spread in every part of the world. It may be interesting to refer here to the visitation of cholera in

* Watson's “Principles and Practice of Physic.”

1848-49, when the Government, concerned for the future welfare of the community, determined to adopt the surest means of deciding what was really the most efficient treatment of this disease. A medical committee of the Board of Health, with the President of the Royal College of Physicians at its head, was formed, and an experienced Medical Inspector of the Cholera Hospitals appointed. Printed forms were furnished to each hospital, so that all the circumstances of each case, its symptoms, treatment, and results, might be recorded daily, under the constant supervision of the appointed inspector. The statistics thus obtained were considered and digested by this medical board, and, finally, reported to the Government. It is indeed a humiliating fact to record that this paid board, to whom the Government had confided so important a trust, actually suppressed the statistical report of the Homœopathic Cholera Hospital! This report was afterwards obtained by order of Parliament, and published in a Parliamentary return, dated May 21st, 1855, entitled "Cholera." It testified that, by the homœopathic treatment of Asiatic cholera, the death-rate was 16·4 per cent., while, according to the aggregate statistics of the other hospitals, it was 59·2 per cent.* "In what language," said the late Dr. Horner, "can I truly designate this conduct of the medical board, but as a conspiracy against the truth and against humanity?"

* In an article in the *Lancet* of July 28th, 1866, entitled "Cholera in the Metropolitan Hospitals," the writer states, "We visited the cholera wards on Saturday and Tuesday last. There was no mistaking the severity of type displayed by the cases. They have been marked by all that intensity which is characteristic of the first cases in an epidemic, and, we regret to say, by the usual amount of fatality. Some have died within nine hours of the attack, others have lingered on in a state of collapse for several days. Some have rallied from collapse and succumbed afterwards with symptoms of local congestion in various organs. It is scarcely necessary to say that no effort has been spared by the physicians." After recording various methods of treatment, it is added, "It is a melancholy fact to record, but at the time of our last visit no case of undoubted cholera had recovered."

That the record of the treatment furnished by the Homœopathic Cholera Hospital was strictly correct, Dr. Mac-loughlin, their own Medical Inspector, testified:—*All I saw were true cases of Asiatic cholera, in the various stages of the disease; and I saw several cases that did well under the Homœopathic treatment which I have no hesitation in stating would have sunk under any other.*" The same gentleman added:—"Although an allopath by principle, education, and practice, yet, was it the will of Providence to affect me with cholera, and deprive me of the power of prescribing for myself, I would rather be in the hands of a homœopathic than an allopathic adviser."

The history of cholera furnishes a beautiful practical illustration of the worth of that fundamental principle of Homœopathy, namely, that we must ascertain the powers of medicines by testing them upon the healthy body, before they can be properly applied to the removal of disease. Possessed of this knowledge, a medical man can treat a perfectly new disease, or one with which he is totally unacquainted, the symptoms of which correspond with those of any medicine previously so tested. Medicines being tried upon medical men and their friends when in a state of health, the organs of the body they have a special affinity for, and the symptoms they are capable of producing, are ascertained, and we are often able to employ them with almost mathematical certainty in diseases having similar symptoms. Thus Hahnemann, from a mere description of the symptoms of cholera, and before he had seen or treated a single case, selected from his *Materia Medica* those very remedies which were subsequently so triumphantly successful in the hands of homœopathic practitioners.

CAUSE.—An aerial, or certainly an air-borne *poison*, which, absorbed, infects the blood. Except under the influence of a *poison*, no person in good health has ever been known in

a few minutes to become shrivelled up, the surface of the body to be deadly cold, the tongue icy to the touch, the face and extremities to turn purple, and with or without vomiting of a fluid like rice-water, to die in a few hours. Dr. Milroyd relates that within little more than five minutes, hale and hearty men were seized, cramped, collapsed, and dead. Instances of death taking place in two, three, four, or more hours, are extremely common. At Teheran, those who were first attacked dropped suddenly down in a state of lethargy, and at the end of two or three hours expired, without any convulsions or vomiting, but from a complete stagnation of the blood. Such records prove the essentially poisonous nature of the disease, and that its action is often rapid, powerful, and overwhelming.* The experience gained during former visitations of cholera teaches us that it seizes the poor in a far greater proportion than the rich, that the most potent conditions favourable to its spread are poverty, overcrowding, filth, intemperance, and *impure water*, and that as we prevent the accumulation of filth, foul air, and other causes of general disease, and supply the people with wholesome food and pure water, so we render inoperative the powerful agencies by which this dreaded disease chiefly spreads.

TREATMENT.—*Camphor*.—We are glad to quote Dr. Rubini's method of treatment by the *Spirits of Camphor*, which consists of equal parts by weight of *Camphor* and of spirits of wine—a preparation made by distilling spirits of wine till it attains to 60 degrees overproof, when it will dissolve and hold in solution its own weight of *Camphor*. With this *Saturated Spirit of Camphor*, Dr. Rubini, in 1854-5, treated 377 cases; Dr. Sabbatini 27; Dr. Salutanzi 56; Dr. Spitelli 80; Dr. Ricci 1; and every case recovered. Dr. Rubini's cases were treated at the following public institutions in Naples: 200 at the Royal Alms House (1854);

* See Aitken's "Science and Practice of Medicine."

11 in the Royal Poor House (1855); and 166 in the Infirmary of the 3rd Swiss Regiment (1855). That these 377 cases were all genuine cases of Asiatic cholera, and some "terribly severe," and that all recovered, is avouched by the following distinguished individuals, with their official seals attached :—Il Generale Governatore Ricci; Il Maggiore Commandante Nicola Forni; Il Capitano Commandante Carlo Soderò; Generale Commandante Fileppo Rucci; Colonel Eduardo Wolff. In addition to these 377 cases in 1854 and 1855, Dr. Rubini treated 51 cases in 1865 with the same result. So that not in *one* epidemic only, but in *three*, has the *Saturated Spirit of Camphor* been tried and found equally efficacious.

Nor can it be said that the cholera did not exhibit itself in a severe form in Naples on these occasions; for we learn from Dr. Rubini, that the death-rate under Allopathy there, in 1854 and 1855, was 70 per cent; and with respect to the visitation of 1865, a graphic account will be found in the January number of the *Cornhill Magazine*, from which it appears that that epidemic was not less fatal than its predecessors; and "the correspondent" of the *Daily News*, whose despatch appears in that journal of the 7th December last, says, "The hotels were empty—a perfect panic prevailed—the people were crazy with fear."

DIRECTIONS FOR TREATMENT.—The directions given by Dr. Rubini, as respects dose and diet, are as follows :—"When a man is seized with cholera, he should at once lie down, be well wrapped up in blankets, and take, every five minutes, four drops of the *Saturated Tincture of Camphor*. In very severe cases the dose ought to be increased from five to twenty drops every five minutes. In the case of a man of advanced age, accustomed to take wine and spirits, where the drug given in drops has no effect, give a small coffee-spoonful every five minutes, and in a very short time the

coveted reaction will occur. Ordinarily, in two, three, or four hours, the reactionary fever will set in, with abundant perspiration, and then cure will follow."

"The preventive method," writes Dr. Rubini, "is this:— Let those who are in good health, while living in accordance with their usual habits, take every day five drops of the *Saturated Spirit of Camphor* upon a small lump of sugar," (water must never be used as a medium, or the camphor will become solid, and its curative properties cease,) "and repeat the dose three or four times a day, if there is any reason to fear an attack. Spices, aromatic herbs, coffee, tea, and spirituous liquors should be avoided." Dr. Rubini allows his patients to drink cold water in small quantities at short intervals; and when the reactionary fever has passed off, he allows a little light broth and farinaceous diet.

The remedies hitherto usually recommended in addition to *Camphor*, are, *Veratrum*, *Cuprum*, *Arsenicum*, *Mercurius Cor.*, and *Ipecacuanha*. After the statements made on Dr. Rubini's treatment by *Camphor* alone, it seems superfluous to add any remarks on the above or other remedies, except to state that one or more may be required after reaction has set in, the selection of which must be determined by the nature of the complications that may arise, or the sequelæ that may follow. Whatever remedies are administered, the following two suggestions should ever be acted upon:— 1. The patient should have absolute rest in the recumbent posture, from the very commencement of the initiatory diarrhoea. 2. A hopeful and cheerful state of mind should be fostered: a firm presentiment of death is always unfavourable.

SANITARY AND HYGIENIC MEASURES.—The following excellent advice has been given, and should be adopted on the earliest indication of cholera:—

The house should be well aired, especially the sleeping apartments, which should be kept dry and clean.

All *effluvia* arising from decayed animal or vegetable substances ought to be got rid of; consequently, *cesspools and dust-holes should be cleaned out, and water-closets and drains attended to.*

All exposure to cold and wet should be avoided, and *on no account should anyone sit in damp clothes, particularly in damp shoes and stockings. Care should be taken to avoid chills or checking the perspiration.*

The clothing worn must be sufficient to keep the body in a comfortable and even temperature.

Habits of personal cleanliness should be cultivated, and regular exercise in the open air enforced; late hours forbidden; regularity in the periods of repose and refreshment observed; and, as much as possible, all anxiety of mind avoided.

The diet should be wholesome generally, and adapted to each individual habit. *Everyone should, however, be more than ordinarily careful to abstain from any article of food (whether animal or vegetable), no matter how nutritious and digestible to the generality, which may have disordered his digestion upon former occasions, and to avoid all manner of excess in eating and drinking.*

Raw vegetables, sour and unripe fruits, cucumbers, salads, pickles, etc., should not be allowed.

. The more wholesome varieties of ripe fruits, whether in their natural or cooked state, and vegetables plainly cooked, may be partaken of in moderation, by those with whom they agree.

Non-acid wines and beer, of good quality, may also be used in moderation by those accustomed to them.

19.—Worms (*Helmenthiasis*).

It is a curious fact, and a humiliating one, that the human body should furnish both a dwelling-place and food for a host of animal parasites, not only after death, but also during life. Indeed, helminthologists are constantly making additions to the existing list of verminous creatures who get within, and subsist upon, the human body. It has been well remarked, “The wisdom of creative design is not easily fathomed when we see the higher orders of animals, and man himself, perishing in order to afford food and a means of propagation to the marvels of organization which appear to us always obnoxious and destructive—born for evil, and not calculated to play in this world’s *rôle* any other than an offensive part.” “Most animals,” remarks Dr. Aitken, “have each their own peculiar parasites—that even parasitic animals are themselves infested with parasites—an observation embodied in the Hudibrasian couplet:—

‘These fleas have other fleas to bite ’em,
And these fleas, fleas, *ad infinitum*.’”

In the human body, these parasites burrow beneath the skin, infest portions of its surface, occupy internal organs, such as the liver, and even the brain,* and especially the intestinal canal. Indeed, there is scarcely a tissue or organ of the body that has not been invaded by them. The *Guinea-worm* penetrates the skin, and takes up its residence in the sub-cutaneous areolar tissue, producing great uneasiness and

* The Registrar-General, in his sum-total of deaths from cerebral diseases, includes those in which the brain appeared perfectly healthy, except that its integrity and functions had been interfered with by the pressure exercised by a growing parasite. No doubt they were introduced into the stomach with water, to which they first gained access by escape from the parent tape worm; thence they have bored their way into the circulating medium by penetrating the coats of the stomach, and being transported by the circulating medium to the head, have voluntarily lodged there.

itching, and, ultimately, suppuration. The *chigo* selects the skin of the feet, beneath which it forms a little cyst, and there deposits its eggs. The *Echinococcus*, or *hydatid*, is a microscopic object in the form of a mouth, surrounded by a circle of hooks, and is most frequently found in the liver. The *Cysticercus cellulosus* has been found in the muscular tissue of the heart, and in the brain, the eye, and the tongue. But it is the intestines that are most frequently infested with worms; it is, therefore, to the symptoms they there produce, and the necessary treatment, that we purpose chiefly devoting the present chapter.

VARIETIES.—There are many species of worms which infest the human body, but we shall only refer to the following, which are the chief, viz., *Ascaris*, *Lumbrici*, and *Tænia*.

1.—The *Ascaris Vermicularis*, or thread worms, infest the *rectum* (lower bowel). They are very small, measure about a quarter to half an inch long, multiply rapidly, occur chiefly in growing children, and occasion much local irritation. The chief *symptom* is intolerable itching about the anus in the evening, aggravated by the warmth of bed; also picking of the nose, foetid breath, depraved appetite, nervous symptoms, and disturbed sleep. If an examination be made after the patient gets warm in bed, thread worms may be detected crawling about the entrance to the bowel.

2.—*Lumbrici*, or round worms, also exist in children, their habitat being the small intestines, where they feed on the *chyle*, and attain a length of six to sixteen inches. The *symptoms*, often obscure, are pain of the belly, fretfulness, grinding of the teeth, disturbed sleep, or other convulsive attacks; also itching of the nose and anus. The child becomes sallow, its limbs waste, but its belly is enlarged, hot, and tense; the appetite is uncertain, often voracious; the breath is offensive, and the stools contain much slimy mucus. *The worms sometimes travel upwards into the stomach, and*

are vomited, or downwards into the colon, and are passed with the stools.

3.—*Tænia*, or the tape worm, is nearly white, flattened, and of a jointed structure; it attains a great length, even many yards, by repetition of the joints; it occurs in adults; the *symptoms* being masked, its presence is unsuspected until portions are passed in the motions, which do not, however, destroy it. There is seldom more than one worm present at a time, and yet its eggs are millions, each joint possessing an ovary, but they are discharged with fæces, and devoured by unclean animals—swine, ducks, and rats; in these creatures they become developed, but not always into tape worms, for they appear to go through several generations before returning to the jointed form. They are probably introduced into the human body by eating unwholesome animal food, especially tripe and sausage skins imperfectly cooked. It is supposed that the ova sometimes reach the circulation, and in the liver or other organs are developed into encysted *entozoa*, commonly called *Hydatids*.

GENERAL SYMPTOMS.—Sudden changes in the colour of the face; dark semi-circles under the eyes; copious flow of saliva; nausea; insipid, acid, or foetid odour of the breath; a voracious, alternating with a poor, appetite; a frequent feeling of malaise; itching of the anus; talking and grinding the teeth during sleep; thick and whitish urine; tightness and swelling of the lower part of the abdomen; and, if much irritation is occasioned by the presence of worms, the nervous system may become implicated, and convulsions, epilepsy, chorea, or delirium, ensue. Perhaps the only irrefragable sign is the presence of worms in the stools, or in the matter vomited.

PRODUCTION OF WORMS.—Intestinal worms spring from germs introduced from without, and which find in the interior of other living bodies the only conditions compatible

with their development and growth. To suppose the spontaneous origin of intestinal worms would be to strike at the root of that fundamental argument of natural theology, which infers the existence of a first intelligent Cause, from those evidences of adaptation and design which are impressed upon all portions of the visible universe. There is no instance of a living structure being developed from inanimate matter, except through the instrumentality of a previously existing principle. The myriads of insects which teem in the earth, air, and water, have all sprung from creatures of a like kind, and have derived their life through countless generations from the first of their species. In the case of parasites affecting man, they are of complex but harmonious organization, furnished with digestive organs, instruments of locomotion, and with male and female organs of generation. This last fact is conclusive that they proceed from ova or germs, which quicken whenever they are introduced into their proper element. If they ever arise spontaneously, why should they be furnished with a generative apparatus? Some of the entozoa are peculiar to certain localities, and strangers visiting such places contract them. The tape worm invades the intestines of persons travelling in the country to which it belongs; thus the tape worm of England is the *Tænia solium*, that of Switzerland is the *Tænia lata*; but an Englishman visiting Switzerland is liable to the *Tænia lata*, and, on the other hand, a Swiss in England is liable to that variety common to our country. The following curious story was related by Mr. Abernethy:—"A shepherd had to drive a flock of healthy sheep to a distant part of the country. The journey occupied two or three days. On the road one of the animals broke its leg, and was carried the rest of the way on horseback. All the flock, except this hurt individual, were turned for one night into a marshy pasture. The *broken limb* was set, and the patient got well, and was the

only one of the flock that did not subsequently become affected with the rot, the only one that escaped having flukes in its liver. Is it not almost certain that the germs of these parasites were swallowed with the herbage cropped by the sheep in the damp meadow? ”*

MODES OF THE INTRODUCTION OF WORMS INTO THE HUMAN INTESTINES.—Imperfectly-washed *watercresses*, in which condition aquatic animalcules which adhere to them are swallowed; *market-garden vegetables*, especially those in the production of which filthy water or liquid manure has been used to increase the fertility of the crop; drinking *water* which contain the ova of entozoa, which escape from the alimentary canal of dogs, and, in easily-understood ways, are transported into ditches, ponds, lakes, or rivers; or eating food which has been immersed or washed in water polluted as above; eating raw or underdone meat, etc. People who live in places where dogs abound are very liable to the hydatid-forming tape worm which is derived from dogs; hence this disease is very prevalent in Iceland, where every peasant owns, on an average, half-a-dozen dogs.†

The dissemination of tape worms from man to animals, and *vice versâ*, is easily explained. The pork tapeworm is said to contain at least 45,000 eggs, and these escaping from the joints before they leave the body, or subsequently, are distributed by water, sewage, or other means, reaching the stomach of pigs or even man, where the gastric juice dissolves the shell of the egg and liberates the embryo, which penetrates the tissues around. Parasitic maladies in the pig chiefly abound in districts where swine live most among human beings. Enclosed in farm yards, or in piggeries at a proper distance from human habitations, these animals are

* Sir Thomas Watson's Lectures, vol. 2.

† In the British Islands the pig holds the same position in propagating entozoa that the dog does in Iceland.

generally free from worms which are likely to exist in the body of man. The Irish pig, allowed the free range of house and road, where every kind of filth is devoured, charged with the ova of parasites expelled by man or some of the lower animals, is most commonly injured by entozoa. "The observations of helminthologists prove that it is not unattended with danger for human beings to sleep together when one is affected with tapeworm or trichina. How much more dangerous, then, for animals to live with people who disregard all habits of cleanliness! Though we refuse to believe that filth breeds parasites, we must not forget that dirt protects the ova and favours their transmission from one nest to another. The terrible hydatid disease, which is the direct cause of one-fifth of the human mortality of Iceland, is due to negligence and dirt. The Icelanders slaughter their animals, and leave the offal to decompose. Dogs devour the entrails, which abound in entozoa, and, breeding tapeworms within them, disseminate eggs over the whole country (*Gamgee*).

TREATMENT.—Intestinal worms being frequently the products of certain morbid states, especially imperfection in the digestive and assimilative functions, the treatment should be directed against the disease itself, rather than against the product it engenders. The effect of most allopathic remedies is, at the best, to excite a discharge of the worms from the system, without correcting the morbid condition on which their existence depends.

Remedies for thread worms: Acon., Ign., Merc., Cin., Calc. Carb., Sulph.

Remedies for round worms: Acon., Bell., Cin., Merc., Sil., Spig., Sulph.

Tape worms: other remedies than those included in our list, and in massive doses, are necessary for the mechanical *expulsion of tape worms*; the one we are in the habit of

trusting to is, the *etherial oleo-resinous* extract of male fern. If the symptoms indicate it, one of the remedies recommended for the other varieties may be afterwards administered.

Aconitum.—At bed-time, for fever, restlessness, and burning and itching at the seat.

Cina.—A valuable remedy for thread worms (*ascarides*), or round worms (*lumbrici*), with the following symptoms:—boring at the nose; livid circles round the eyes; tossing about, or calling out suddenly during sleep; voracious appetite, even after a full meal; nausea and vomiting; griping; itching at the anus, and crawling out of thread worms when the patient is warm in bed; white and thick urine, sometime passed involuntarily; wetting the bed; occasional convulsive movements in the limbs; lassitude, etc.

Mercurius.—This is an invaluable remedy in worm affections, but is more indicated by the nature of the evacuations than by the presence of worms. The motions are whitish, pappy, greenish, and sometimes bloody, with straining and ineffectual urging; there may be also distension of the abdomen, difficult teething, moaning, restlessness at night, foetid breath, augmented secretion of saliva, etc.

Belladonna.—Congestion to the head, starting during sleep, headache, fever, etc. If there is much fever, a few doses of *Acon.* should be first administered.

Nux Vomica.—For both thread and round worms, hard stools, and after the use of indigestible food.

Ignatia.—Intolerable irritation and itching in the rectum and anus, with or without prolapsus of the bowel; spasmodic twitchings. *Ignatia* is generally appropriate in mild, sensitive individuals, particularly women and children, and is generally more useful than *Nux Vomica*.

Sulphur.—After the prominent symptoms have disappeared, to complete the cure.

Calcareæ.—After discontinuing the other remedies, in patients having an hereditary predisposition to worms, with enlargement of the abdomen, glandular swellings, and other strumous symptoms.

Dose and Repetition.—See page 49.

ACCESSORY MEANS.—The food should be simple, easy of digestion, and include wholesome, properly-cooked animal food, especially mutton, beef, fowl, and rabbit; pastry, sweetmeats, sweet-made dishes, pork, and veal, should be strictly avoided. Salt, as a condiment, may be advantageously taken with the food. A draught of spring water should be swallowed every morning on rising, and the whole body, the stomach in particular, bathed with cold water, and afterwards rubbed till the whole skin is in a glow; daily exercise taken in the open air; also injections as recommended in the next paragraph.

INJECTIONS.—These are most useful as means for expelling the worms; half a pint of water, in which a spoonful of common salt has been dissolved, once or twice repeated, will often suffice to relieve a patient of these troublesome creatures. An effort should be made to retain the salt injection for some hours, or even during the night. Afterwards, a simple cold or tepid injection should be used regularly about three times a week, for two or three months, to wash away the slime in which the ova exists. But the general and medicinal treatment can only be relied upon for improving the health and preventing their re-formation.

PREVENTION OF TAPE WORMS.—1. Avoid open waters, either for drink or for use in the preparation of food, into which the carcasses of dogs are sometimes thrown, or into which tape worm eggs may be washed by rain, or other agencies, or to which even dogs or other animals have access. All suspected water should be previously boiled, *distilled*, or finely filtered. 2.—Doubtful pieces of meat,

suspected to contain entozoa, should be destroyed by *fire*; if thrown to dogs, or allowed to accumulate on the ground, or even buried, tape worms are propagated, and human health and life endangered. 3.—Raw or underdone meat, especially hams, bacon, sausages, etc., should be carefully avoided. Cooks, butchers, etc., are more liable to be infested with *tænia* than other persons; and in countries where uncooked flesh, fowl, or fish, is consumed, tape worms abound. Good cooking ranks next in importance to the attempt to exterminate parasites from the animals we eat, or the water we drink. 4.—Vegetables and salads, eaten raw, should be first most scrupulously washed, as it is through such media that the ova of *cysticerci* and *echinococci* often find their way into our bodies.

CHAPTER V.

AFFECTIONS OF THE LIVER.

1.—Inflammation of the Liver (*Hepatitis*).

THE liver, the largest gland in the body, is a secretory duct and a blood-elaborating apparatus. Acute inflammation of this organ is not a frequent disease in this country, although it does sometimes occur, but it is very common in tropical climates.

SYMPTOMS.—Acute inflammation of the liver is usually ushered in by rigors, which are quickly followed by hot skin, thirst, and scanty urine, the fever sometimes assuming a typhoid character; pain more or less severe in the region of the liver, aggravated by pressure, deep breathing, or coughing; fullness from enlargement of that organ; a yellow tinge of the conjunctivæ, and often a general jaundiced

state of the skin; the breathing is short and thoracic, being performed almost entirely by the intercostal muscles; sympathetic cough and vomiting.

The symptoms vary according to the portion of the gland implicated in the inflammatory process. When the disease is in the convex side of the liver, it is accompanied by a burning, stitching pain in the right side, which extends into the chest, under the *clavicle* (collar-bone), between the shoulder-blades, to the top of the right shoulder, and sometimes down the arm, and is aggravated by external pressure. If the inflammation is in the inner portion of the liver, there will be the symptoms already indicated, namely, nausea and vomiting; white or yellow-furred tongue, bitter taste, scanty or saffron-coloured urine, and yellow colour of the eyes and skin. If the substance of the gland is involved, the pain is of a dull, tensive character; if the thin serous covering which invests the organ, the pain is sharp and lancinating. Whatever part of the liver is diseased, increased secretion of bile, some degree of jaundice, dyspnoea, cough, etc., are present.

TERMINATIONS.—1. *Resolution*.—This is indicated by an amelioration of the febrile symptoms, copious perspiration, and an abundant deposit in the urine. 2. *Abscess*.—Matter forms, the patient experiencing throbbing, pulsating sensations in the part, with the general symptoms of hectic fever, the abscess discharging itself into the stomach, duodenum, or colon, or externally. 3. *Chronic inflammation*.

CAUSES.—Acute inflammation of the liver is most frequent in India, from the climate and diet not suiting European constitutions, and is seated in the substance of the liver: in this country it arises from cold and other causes, and is then seated in the peritoneal serous covering, resembles pleuritis, and ends in adhesion to the diaphragm or other surrounding parts. Functional derangement, with

suppressed secretion, sometimes accompanies congestion of the gland. Dram-drinking often leads to a hard, contracted condition of the liver, called *Cirrhosis* or *hob-nailed liver*, which leads to dropsy.

TREATMENT.—The following are the chief remedies in the domestic treatment of this affection—*Acon.*, *Merc.*, *Nux V.*, *Chin.*

Aconitum.—Feverish symptoms, anguish, restlessness; foul, yellow-coloured tongue, acute pains, impeded breathing, white clay-like stools, and red urine. A dose every two or three hours. In very acute cases the strong tincture of the root may be used with great benefit. A few drops may be let fall into a tumbler (see page 48), which should then be half filled with cold water, and a dessert-spoonful taken every two or three hours for several times.

Mercurius.—Pressive pains under the ribs, which prevent the patient from lying long on the right side; yellow tinge of the whites of the eyes, and sallow appearance of the skin over the body; shivering, frequently followed by profuse, clammy perspiration; want of appetite, thirst, a foul taste in the mouth, with a relaxed or torpid condition of the bowels; formation of hepatic abscesses.

Bryonia.—Severe pains of a shooting, stinging, or burning character, increased on pressure, with enlargement and hardness of the liver, and obstinate constipation. It is especially useful after *Aconitum*.

Belladonna.—Severe pains in the region of the liver, extending to the chest, right arm, and stomach; headache, giddiness, intense thirst, restlessness, anxiety, with tendency to head symptoms. It may be alternated with, or follow, *Aconitum*.

China.—Paroxysmal attacks, worse every other day; pain, swelling, and hardness in the region of the liver; bitter taste, and thickly-coated tongue; yellowish eyes and skin. A dose every four hours.

Hepar Sulph. and *Silicea*.—One or both of these remedies may be indicated in diffused or circumscribed abscesses of the liver.

Arsenicum.—In extreme cases, with great weakness, intense burning pain, vomiting of bile, and exhausting diarrhoea. A dose every two or three hours; when improvement has taken place, thrice daily.

Nux Vomica.—Hepatitis from intoxicating drinks, excessive or stimulating food, or too little out-door exercise, with constipation, and high-coloured or deep-red urine. A dose every four hours.

ACCESSORY MEANS.—The whole of the affected part should be covered with two or three thicknesses of linen, squeezed out after immersion in a lotion of half a drachm of the strong tincture of the root of *Aconitum* to half a pint of hot water, and covered with oiled silk and flannel, or spongopiline. In mild cases, and in patients of vigorous health, the compress may be applied cold. The general treatment is the same as recommended under “Inflammatory Fever,” page 55–6.

2.—Chronic Inflammation of the Liver—Liver Complaint.

SYMPTOMS.—These are similar to those of the acute form, except that they occur in a less marked degree. A prominent feature is depression of spirits, with indigestion, distension of the stomach, constipation, clay-coloured evacuations, languor, lassitude, and a kind of dread of some impending evil. There is also sallowness of the complexion, sometimes emaciation, and the organ itself may be either enlarged or diminished in size.

CAUSES.—The *chronic form of hepatitis* frequently follows, and is a consequence of the acute, or it may be due to other

diseases of the liver, intemperance, especially in spirituous liquors, deficient muscular exercise, misfortune, depression of spirits, suddenly suppressed perspiration, etc. Mercurial preparations, such as *calomel* and the *blue pill*, are frequent causes of liver complaint.

TREATMENT.—Similar remedies to those prescribed in the previous section; also the following—*Podophyllum*, *Aurum*, *Nit. Ac.*, *Lyc.*, and *Sulph.*

Aconitum.—Inflammatory symptoms.

Podophyllum.—Chronic inflammation of the liver, with indigestion, heartburn, constipation alternating with diarrhœa, piles, prolapsus, etc.

Aurum.—Indicated for patients who have taken much *mercury*, and have pains in the bones, soreness of the flesh, and are dejected and melancholy.

Lycopodium.—Continuous pain in the right side and great torpidity of the bowels.

Nitric Acid.—Chronic hepatitis, in constitutions shattered by repeated attacks from residence in tropical climates, or by the constant abuse of strong drink, and especially if the patient has been drugged with calomel and drastic purgatives.

Sulphur.—Shooting pain in the liver; chronic or obstinate constipation and hæmorrhoids.

For other indications see the previous section.

ACCESSORY MEANS.—Change of air; if the patient resides in a hot climate, early removal to a temperate region is necessary. In chronic hepatitis, as it exists in this country, cold or tepid *sponging or bathing*, and vigorous friction with a coarse towel immediately afterwards, to promote the healthy functions of the skin, will be found a valuable auxiliary. The addition of *Sea-salt* to the water, as recommended page 31, will add to the invigorating effects of the water. The patient should avoid stimulants, pastry or rich food, spices and coffee, and strive to live regularly and contentedly.

One or two hours out of twenty-four should be spent in outdoor walking or horse exercise. If these suggestions are early carried out, before the disease has effected disorganization of the gland, a permanent cure may be expected, and earthly existence rescued from the disabilities and sufferings inseparable from disease.

3.—Jaundice (*Icterus*)—The Yellows.

The above terms are used to express a group of diseases, in which many of the tissues and fluids of the body become yellow, especially the whites of the eyes and the connective tissue of the body. It is often a symptom of some acute or chronic affection of the liver, rather than a distinct disease.

SYMPTOMS.—Yellow tinge of the skin and whites of the eyes; yellow-coloured or deep-brown urine, which stains the linen yellow; whitish or drab-coloured fæces; constipation; lassitude; anxiety; pain in the stomach; bitter taste in the mouth; and generally febrile symptoms. Sometimes, especially in children, the bowels are relaxed with diarrhoea, from the food not being properly digested and becoming irritant. There are also, usually, depression of spirits, prostration of strength, and slowness of the pulse. The presence of the yellow tint in the conjunctivæ and urine is very conclusive that the patient is suffering from jaundice, and not merely from the sallowness of anæmia. If nitric acid be added to the urine, it changes it to a deep green colour. When there is obstruction from a gallstone, the most acute suffering is induced; the pains come on in paroxysms, and are often accompanied with vomiting and hiccough.

CAUSES.—Jaundice, as pointed out by Dr. Budd, may be produced in two ways:—(1st) By some impediment to the flow of bile into the duodenum, and the consequent absorption of the retained bile; and (2nd) by defective secretion

on the part of the liver, so that the constituents of the bile are not separated from the blood.

The most common impediment to the flow of bile is the impaction of a *gallstone* in the natural channels of the bile. A gallstone consists of bile in a crystalline form, it having been released from its solvent properties. Derangement in the functions of the liver connected with the secretion of bile are frequent causes, and are consequent on atmospheric changes, dietetic transgressions, dissipation, unrestrained fits of passion, etc. The excessive use of quinine, rhubarb, or calomel in some fevers, may also be stated as a cause, as these drugs obstruct the bile-duct. Pressure of the enlarged womb in pregnancy, or the growth of tumours, causing obstruction of the gall-ducts, are also occasional causes of jaundice. But sedentary occupations and high living are probably the most frequent causes.

TREATMENT OF JAUNDICE :—

1. *From an impacted gall-stone.*—Acon., and the application of a large hot compress over the seat of pain.

2. *Caused by arrest of bile from congestion.*—Merc., or Podoph.

3. *From mental emotions*, as grief, anger, or fright.—Ign., or Cham.

4. *From constipation.*—Nux V.

5. *In infants.*—Cham., or Merc.

Aconitum.—Jaundice with symptoms of acute inflammation and great pain in the region of the liver.

Mercurius.—This is one of the most valuable remedies, and will often effect a speedy cure; it is especially useful after the use of *Acon*.

Podophyllum.—Arrest of bile, from torpor or congestion of the liver and bile-ducts.

Chamomilla.—Jaundice in passionate, irritable, or fretful patients, especially children.

China.—If the disease is caused by marsh miasm, the fever is intermittent, or the patient has been weakened by diarrhoea or loss of blood.

Nux Vomica.—Jaundice attended with costiveness, sensitiveness in the region of the liver, or arising from sedentary habits, or indulgence in spirituous liquors.

Jaundice during pregnancy, or from cancer or other tumour of the liver, must be treated according to the circumstances of each particular case, and require professional attention.

DIET.—This should be light, and easy of digestion, consisting of chicken-broth, weak beef-tea, *toasted* bread, scalded with hot water with a little sugar, roasted apples, and as much cold water as the patient desires. See under “Inflammatory Fever.”

ACCESSORY MEANS.—Flannels squeezed after immersion in *hot* water, or a hot hip-bath relieves the pain attending the passage of gall-stones. Jaundice from inactivity and chronic congestion of the liver requires change of air and scene, travelling, regular walking or horse exercise, the use of the abdominal compress, as described page 221, with regular and temperate habits.

CHAPTER VI.

DISEASES OF THE ANUS.

1.—Piles (*Hæmorrhoids*).

DEFINITION.—Piles, the most frequent disease of the anus, are small tumours, consisting of folds of mucus and sub-mucus tissue, in different stages of inflammation, congestion, or permanent enlargement; they are situated within or just *outside* the anal aperture, and originate from dilatation of the *hæmorrhoidal* veins.

VARIETIES.—Piles are classified as *internal* or *external*, according as they are situated within the rectum or at the verge of the anus. The *external* are covered by skin, and are outside or just around the orifice of the bowel; they vary in number from one intensely painful swelling to numbers clustering together like a bunch of grapes. The *internal* are covered by mucous membrane, and are always within the bowel. Piles are of a pink or purplish hue, forming one or more distinct pendulous tumours, varying from the size of a pea to that of a damson or walnut. Piles that do not bleed are called *blind*; this variety is prone to inflammation when they become tense, appear ready to burst, and are so excessively sensitive, that the patient can scarcely sit, walk, or lie. *Internal piles* are very liable to bleed, especially during the passage of fæces. The blood thus lost is of a bright-red colour, being arterial, and proceeds from the capillaries of the vascular surface of the tumours, and varies in quantity from a few drops to such a profuse discharge as is truly alarming; if hæmorrhage is long continued, an anæmic condition is induced that is highly prejudicial to the constitution. They are seated in the vertical folds of the mucous membrane which lines the bowel; that portion of membrane which invests the piles being extremely vascular, numerous minute vessels of brighter colour than the body of the piles may be seen ramifying on the surface.

SYMPTOMS.—These vary considerably according to the amount of inflammation present. When indolent, the chief inconvenience arises from their bulk and situation; or from getting within the *sphincter* muscle, occasioning more or less pain when the bowel is acting, prolapse, and often a sense of weight and discomfort, which quite unfits the mind for subjects requiring deep thought. But when inflamed, or, in common language, “during a fit of the piles,” there are pricking, itching, shooting, or burning pains about the anus.

increased on going to stool, and a feeling as if there were a foreign substance in the rectum. After emptying the bowel, there is often painful straining, as if it were not emptied of its contents, occasioned by the piles, or the elongated mucous membrane to which they are attached being protruded during the expulsion of fæces, and not replaced sufficiently quick, and so grasped and constricted by the *sphincter ani*, the function of which is to close the aperture of the bowel after defecation. This condition is greatly aggravated if the patient stand or walk much after going to stool, or if the bowels are constipated, so that the rectum is much distended or the fæces become hard. If proper remedial measures are not adopted, the inconveniences and suffering will be seriously augmented, the general health implicated, the patient may lose flesh and strength, and the countenance wear an anxious and care-worn expression.

CAUSES.—The *predisposing causes* are a general plethoric condition of the system, or any circumstances which determine blood to, or impede its return from, the rectum—such as, sedentary habits; luxurious living, especially the use of highly-seasoned food, wines, and spirits; tight lacing; pregnancy; confined bowels; and diseases of the liver. Residence in moist, warm, and relaxing climates; soft, warm beds or cushions, and over-excitement of the sexual organs may also be classed among predisposing causes. The *exciting causes* are anything which irritate the lower bowel, such as straining at stool, hard riding, and the use of drastic purgatives, especially *aloes* and *rhubarb*. Probably the most potent causes of this disease are the indolent and luxurious habits of the wealthy classes, which, by diminishing tone, occasion plethora and a tendency to abdominal congestion, and so exercise a considerable influence in producing this malady. Accordingly we find piles much more *prevalent among* the wealthy than among the industrious

and frugal classes. Age and sex appear to exercise considerable influence on this disease. In early life, it is probably much more frequent in young men than in young women; during pregnancy, and at a later period of life, it occurs much more frequently in women. The comparative exemption of young women is readily accounted for by the monthly discharge from the uterus, obviating congestion that might otherwise occur in its vicinity. At a later period, after the cessation of the menses, or during the pressure of the gravid uterus in pregnancy, congestion is apt to occur in certain neighbouring organs, and so give rise to piles.

TREATMENT.—The following are the chief remedies: *Acon.*, *Nux Vom.*, *Ham.*, *Ars.*, *Sulph.*

Bleeding Piles: *Acon.*, *Ham.*, *Bell.*, *Phos.*, or *China*.

Burning and painful: *Capsicum*, *Petroleum*, *Carb. Veg.*, *Ars.*, or *Graph.*

Piles discharging mucus: *Merc.*, *Ant. Crud.*, *Puls.*, or *Sulph.*

Swollen and protruded: *Lyc.*, *Nit. Acid.*, *Mur. Acid*, *Sepia*, or *Aloes*.

Ulcerated: *Merc.*, *Silicea*, *Arsen.*, or *Sulph.*

During pregnancy: *Nux Vom.*, *Opium*, *Puls.*, *Bry.*, or *Platina*.

Chronic: *Carb. Veg.*, *Nit. Ac.*, *Hep. Sulph.*, *Baryta Carb.*, *Calc.*, *Graph.*, or *Sulph.*

Nux Vomica.—Piles associated with sedentary habits, luxurious living, indulgence in stimulating beverages, depressing mental emotions, confined bowels, pressure, prolapsus, or loss of power of the muscular structure of the bowel. *Nux Vomica* is also required when the disease occurs during pregnancy, from swelling of the abdominal organs, or structural defects of the rectum and adjoining parts. Dose:—thrice daily, for two or three days; afterwards, if it does good, night and morning for a week or ten days. *Sulphur* may advantageously follow this remedy, a dose being

given night and morning for four or five days; or *Sulphur* and *Nux Vomica* may be given in alternation, the former in the morning and the latter at night.

Aconitum.—Piles in an inflamed condition, with feverish restlessness, a sensation of heat, and during the discharge of mucus or blood, a feeling as if warm fluid escaped from the bowel. A few drops of the strong tincture in half a tumbler of water, giving a dessert-spoonful every two hours for several times; afterwards, less frequently, or another remedy may be selected.

Carbo Veg.—Protruding piles, blue and swollen, with soreness, pain, or a burning sensation after an evacuation, discharge of blood or mucus from the rectum, itching of the anus; also bleeding from the nose, determination of blood to the head, great weakness, confined bowels, etc. This remedy is also useful for the sudden arrest of a discharge of blood, with a burning feeling in the anus. After administering it thrice daily for three or four days it may be followed by *Arsenicum*; and if these remedies are beneficial they may be continued during alternate weeks, morning and night, repeating the course several times.

Mercurius.—Acrid and bloody evacuations excoriating the anus, with itching and smarting; also when in place of blood the discharge is mucus, with swelling of the mucous membrane; piles accompanying inflammation of the liver, jaundice or bilious diarrhœa.

Hamamelis.—A valuable remedy in bleeding piles; or even when there is only a varicose condition of the hæmorrhoidal veins, particularly if the patient is also troubled with a varicose state of the veins of the lower extremities. For cases in which there is considerable loss of blood, it should be used both internally and externally, a lotion being made by adding thirty drops of the strong tincture to four ounces of water, and applied by means of two or three folds of linen, covered by oiled silk, and renewed several times daily.

Arsenicum.—Inflammatory hæmorrhoids, causing a burning sensation, and sometimes a feeling compared to passing red-hot needles through the tumours, with intolerable pain in the back, protrusion of the tumours, *emaciation and prostration of strength*. A dose thrice daily. It may precede, follow, or be alternated with, *Carb. Veg.*

Sulphur.—This remedy is regarded as one of the most valuable in every variety of piles, especially chronic cases, or piles occurring in scrofulous individuals, with frequent ineffectual inclination to stool, or thin evacuations mixed with blood; great pain both internally and externally; the tumours protrude considerably, and are pushed back with difficulty; also smarting pain in passing water. *Sulph.* may often be alternated with *Nux*, giving the latter at night and the former in the morning; or *Sulph.* may follow *Nux* to complete the cure.

Arnica.—When the tumours are swollen, sore, and painful, and caused by external injury, such as riding on horseback.

China.—Where the loss of blood has been considerable, and the patient is much debilitated. It is most useful after a discharge of blood has been arrested by *Acon.*, *Ham.*, or any other remedy.

DIET AND ACCESSORY MEANS.—Patients should avoid coffee, peppers, spices, stimulating or highly-seasoned food, the habitual use of beer, wine, spirits, and all kinds of indigestible food. Light animal food, a liberal quantity of well-cooked vegetables, and ripe and wholesome fruits, form the most suitable diet. During an attack of piles animal food should be sparingly used.

Sedentary habits and much standing, on the one hand, and extreme fatigue on the other, are prejudicial; as also is the use of cushions and featherbeds. The pain attending *blind piles* may be relieved by ablution in cold water, or in tepid water if that is found more agreeable. *Bleeding piles*

may be relieved by drinking half a tumbler of cold water, and then lying down for an hour. The horizontal position should be maintained as much as possible, that being most favourable to recovery. When piles protrude, the use of *petroleum soap* will be found of great utility.

INJECTIONS.—Great relief and permanent benefit will also follow an occasional injection of from half a pint to a pint of cold or tepid water up the lower bowel, by means of an india-rubber syringe, with an ivory tube. This acts beneficially, by constricting the blood-vessels and softening the fæces before evacuation, and by giving tone to the relaxed structures. Injections of cold water are also of service after each evacuation, when any feculent matter remains behind which may thus be removed; at the same time the application of water exercises a most favourable influence on the blood-vessels and nerves of the bowels. As a rule, tepid injections are most suitable for patients of a full habit of body, and cold ones for those of relaxed constitutions.

When piles are excessively sensitive or painful, the patient should sit over the steam of hot water, or keep his bed, or recline during a great part of the day on a couch. Strict cleanliness is also essential. The parts should be frequently washed with soap and cold water; or when the tumours are inflamed and painful, with tepid water. A warm bath, or the vapour bath, may be occasionally used at night, when the liver is inactive and the skin dry and harsh. It should be followed in the morning with a cold bath, or the body should be rapidly rubbed, first with a wet cold towel, and then with a dry one. By such means the general circulation is promoted, the vital functions are more vigorous, and the functions of the skin (the greatest safety-valve of the body) being healthily performed, the system is relieved of any accumulated morbid secretions.

The Abdominal Compress, as described in the section on

“Constipation,” is strongly recommended as *preventive* of piles, and should be adopted directly the first symptoms are felt; also as a *curative* means in connexion with others pointed out.

Another most important point for patients troubled with piles is, that the habit should be acquired of going to stool at night, immediately before retiring to bed, instead of morning, so that the horizontal position may favour the early subsidence of the tumour, instead of its remaining in an inflamed and prolapsed condition, to the great annoyance and distress of the patient, and to the permanent injury of the parts.

SURGICAL MEASURES.—“Radical” remedies for the treatment of piles are, chiefly, *Nitric acid*, for destroying the diseased surface; the *Ligature*, a piece of hempen twine firmly secured round the base of each pile; and *Excision*, which is variously performed. For a description of these methods for the cure of piles, surgical writers must be consulted, especially Erichsen, Druitt, Smith, and Lee. Happily, active interferences, such as those just named, are rarely required under homœopathic treatment, the most inveterate cases generally yielding to our prescriptions without the use of the knife, the ligature, or nitric acid.

2.—Protrusion of the Lower Bowel (*Prolapsus ani*).

DEFINITION.—An inversion of the lower portion of the rectum, and its protrusion through the anal aperture. In slight cases the protrusion only takes place after the action of the bowel, and goes back of itself, or is easily returned; if unrelieved, however, it may protrude from riding, walking, or even standing, and be replaced with difficulty.

CAUSES.—The disease may be due to constitutional laxity and delicacy of structure, but more frequently to immoderate

straining at stool, or when urinating; also to constipation, piles, stone in the bladder, or stricture of the urethra. Although not confined to them, it is most frequent in children.

TREATMENT.—*Ignatia*.—This remedy is often specific, and is generally the first to be used, especially for infants and children. The indications are, frequent ineffectual urging to stool, straining, difficult passage of fæces, itching, and prolapse of the bowel.

Nux Vomica.—As a rule, for males and adults of either sex of a vigorous constitution, this remedy should be selected instead of *Ignatia*.

Mercurius.—Prolapsus, with much itching, diarrhœa, discharge of a yellowish mucus, and hard, swollen abdomen.

Lycopodium.—Symptoms preceding actual prolapse—itching, soreness, and general relaxation and emaciation; also in obstinate cases, after other remedies have only effected a partial cure.

Podophyllum.—Prolapsus occurring in the morning, with chronic diarrhœa, especially in children and women; irritation from teething, and diarrhœa with straining and offensive stools, are additional indications.

Calc., *Sep.*, *Ars.*, *Bry.*, and *Sulph.*, are also useful remedies in many forms of this complaint.

Dose and administration.—See page 49.

ACCESSORY MEANS.—These must include—(1.) *The return of the protruded parts*, which should be carefully washed and replaced by pressure with the forefinger, well oiled, and pushing it up into the anus, carrying the protruded part before it. If the prolapsed part be large, a surgeon's aid should be procured. (2.) *Removal, if possible, of the cause*. If, as is most frequently the case, indigestion, constipation, or piles, is the cause, the suggestions contained in the chapters on those subjects should be observed. The diet

should be plain and nourishing. Bathing the parts night and morning, with cold water, will be very serviceable; also an injection of cold water every morning for a week, and afterwards every second or third day, for a few weeks longer. The habit of going to stool just before retiring to bed, recommended in the section on piles, should also be observed in prolapsus of the bowel.

3.—Fistula in Ano.

DEFINITION.—A fistula may be described as a narrow pipe-like track, lined by a false membrane, resembling a mucous membrane, secreting pus, with a narrow callous opening, with no disposition to heal. A *fistula in ano* is such a track within a short distance of the verge of the anus, and generally originates in an abscess by the side of the rectum.

SYMPTOMS.—There first appears on one or other side of the rectum a small hard lump, which, as it continues to enlarge, occasions considerable pain, and not unfrequently much constitutional disturbance. The surrounding parts soon become much swollen, and the skin red, which is quickly followed by suppuration. During the formation of the abscess, the patient complains of pain in passing his motions, which are sometimes slightly tinged with blood. Great relief follows the discharge of the abscess, which is generally of a most offensive character, and the swelling subsides; but there still remains a small opening near the anus, and upon pressure a hardened track may be felt, conducting towards the bowel. This is the fistula. The external orifice of the fistula is very small, like a pin-hole, and is often difficult to find in the folds of the thin skin near the anus, and even this opening is sometimes concealed by a small papilla.

VARIETIES.—There are three kinds of fistulæ—(1) the *blind external*, which opens only through the skin; (2) the *blind internal*, which opens only into the bowel, usually from $1\frac{1}{4}$ to $1\frac{1}{2}$ inches within the rectum, and is detected by a finger or probe, or may be seen by a speculum; and (3) the *complete*, which opens both ways. The blind external and the complete fistula are indicated by a hardened track which may be felt, leading towards the bowel; but the blind internal is indicated by pain in going to stool, and discharge of pus and blood with the fæces.

CAUSES.—They originate in abscesses, which are prevented from healing by the movement of the *sphincter ani* and the bowel itself; or by the ulceration of the mucous membrane of the rectum, and consequent escape of feculent fluids and gases, which gradually excite progressive ulceration towards the surface. The disease is frequent in consumptive patients, probably from deposit of tubercle under the mucous membrane of the rectum, or the areolar tissue about the rectum losing its fat, and falling into a watery, unhealthy condition.

TREATMENT. — A fistula is often mistaken by non-professional persons for a boil, and the treatment being in accordance therewith, is generally useless. In some cases a fistula can only be cured by an operation, which consists in dividing the *sphincter ani*, so as to obviate contraction of that muscle for a time, and slitting up all ramifications and burrowings of the fistula under the skin. This should never be undertaken except by a qualified surgeon. If the operation is skilfully performed, and the patient's health is not too much impaired, the disease is generally curable, as the sphincter, being divided, leaves the parts at rest, and a free escape is given to feculent fluids and gases, which no longer force their way through the fistulous passage. If, however, the patient is decidedly phthisical, or has any

serious disease of the kidneys or liver, no operation would be justifiable, as the artificial wound would probably never heal. A selection from the following medicines will assist the cure, or if employed early may render unnecessary any operative measures. The choice must be made strictly according to the indications present;—*Silicea*, *Calc.*, *Caust.*, *Lyc.*, *Phos.*, and *Sulph.* These medicines will also be of essential service in those cases in which an operation is deemed inadmissible, or when a patient from other reasons objects to operative measures.

ACCESSORY MEANS.—An occasional poultice; frequent washings with cold or tepid water, a daily use of the sitz-bath, and injections, as directed in the section on piles, are of the greatest utility, both as affording comfort to the patient, and preventing the extension of the disease. Nourishing diet is necessary to fill up the space of the ischio-rectal fossa and to increase the reparatory powers of the system.

4.—Itching of the Anus (*Pruritus ani*).

DEFINITION.—A peculiar morbid itching of the anus; at first of a voluptuous character, but afterwards it becomes a violent and almost unbearable affection:

SYMPTOMS.—Crawling, tingling, irritating sensations about the anus, often most troublesome at night, as the patient gets warm in bed, and preventing sleep. It is frequently complicated with an excoriated or fissured condition of the anus.

CAUSES.—Irritation of piles; worms; lodgment of fæces; suppressed period, or any suddenly suppressed discharge or cutaneous eruption. Frequently itching of the anus is only a symptom of disease of the liver, of some portion of the digestive apparatus, especially the rectum, or of some part in immediate proximity thereto.

TREATMENT.—This must entirely be guided by the cause. One or more of the following remedies, selected according to the cause and the symptoms present, will generally be found efficacious: *Acon.*, *Carbo Veg.*, *Nit. Ac.*, *Sulph.*, *Ant. Crud.*, *Sepia*, *Lyc.*, *Ign.*, or *Merc.*

If connected with piles, worms, or indigestion, the directions given in other portions of this work, under their respective headings, will usually suffice to remove this troublesome affection.

CHAPTER VII.

DISEASES OF THE URINARY ORGANS.

1.—Inflammation of the Kidneys (*Nephritis*).

A MINUTE description of the symptoms and treatment of these affections would not be compatible with the limits of this manual. Hence a brief notice of them must suffice. Diseases of the urinary and sexual organs are often of too serious and complex a nature to be treated other than by an educated and conscientious medical man. At the same time the writer's experience enables him to state that in the great majority of cases they are perfectly and rapidly amenable to skilful homœopathic treatment.

SYMPTOMS.—Inflammation of the kidneys begins with the ordinary febrile symptoms—chills, hot and dry skin, thirst, frequent and hard pulse, and attended from the first, or quickly followed, by deep-seated aching pain in one or both loins near the spine, in the region of the kidneys, which soon becomes acute and pulsative, and is greatly aggravated by the slightest movement. The urine is diminished in quantity, or bloody, with a frequent desire to urinate, or it *is entirely* suppressed; in severe cases there is inability to

walk, or even to stand in the erect posture. Pressure over the inflamed kidneys does not cause much pain, but any movement which calls into action the deep-seated dorsal or lumbar muscles excites intense pain. The pains extend in the course of the tubes which convey the urine to the bladder (*ureters*), or follow the spermatic cord to the testicles, causing retraction of these organs. There are also, generally, nausea, vomiting, constipation, anxiety, and severe constitutional disturbances.

Nephritis and Lumbago.—These diseases may readily be distinguished by attention to the following points:—In *nephritis*, the pains follow the direction of the ureters or the spermatic cord; there are also nausea, vomiting, and frequent desire to pass water, partial or almost entire suppression of the urine, and sympathetic pains in the rectum; symptoms which are absent in *lumbago*.

CAUSES.—Sudden checking of perspiration; strains from lifting heavy weights; the irritation of calculi; the abuse of medicinal substances, such as cantharides or oil of turpentine; or the disease may arise without any *appreciable* cause.

TREATMENT.—*Aconitum* may be first used to subdue the febrile symptoms, and, in slight cases, will be sufficient. In severer cases it may be alternated with *Cann.*, *Canth.*, or *Tereb.*, according to the indications.

Cantharis.—Burning in the urethra; *painful micturition*, passed in *drops*, sometimes with blood. Should the disease, however, have been caused by the application of a *Cantharides* blister to the region of the bladder, two drops of the strong saturated tincture of *Camphor*, or two pilules medicated with the same, will be the appropriate remedy.

Cannabis.—Same symptoms as *Cantharis*, except that there is no discharge of blood.

Terebinthia.—Burning and drawing pain in the region of the kidneys; urination is preceded by cutting pains, and the urine smells like violets.

Arnica.—Nephritis following concussion, a strain, or any external injury.

Nux Vomica.—Nephritis in patients addicted to the use of spirits, coffee, etc.; or troubled with constipation, piles, gravel, colic, retraction of the testicles, etc.

Sulphur.—Chiefly suited to strumous patients, and in such constitutions should always follow the use of other medicines.

ACCESSORY MEANS.—During the acute symptoms, flannels wrung out of hot water, or heated flannels, should be applied over the inflamed kidney, and the patient should remain in bed. In subacute cases, the cold wet compress may be worn around the loins, and will assist the cure, and also tend to prevent a recurrence of the disease. In the acute stage, little or no solid food should be taken, but mucilaginous drinks—barley-water, linseed-tea, etc.—(see page 191), may be used *ad libitum*.

2.—Inflammation of the Bladder (*Cystitis*).

SYMPTOMS.—This, like the last disease, commences with general febrile symptoms. The pain is in the region of the bladder, and travels *upwards* towards the loins, thus distinguishing it from *nephritis*, in which the pain extends from the loins *down* to the bladder. On emptying the bladder, the pain is instantly diminished, but returns immediately that a small quantity of urine collects. Slight movement, evacuating the bowels, and especially efforts of micturition, cause extreme pain; and the urine deposits a mucous, or muco-purulent sediment. The irritation frequently extends to the rectum, and the patient's sufferings are aggravated by *tenesmus*.

CAUSES.—Extension of inflammation from neighbouring parts, prolonged retention of urine, injuries resulting from *difficult* or instrumental accouchement, external injuries,

stone, stricture, or gravel. But perhaps the most frequent cause is *gonorrhœa*, neglected or unskilfully treated.

TREATMENT. — *Acon.* (inflammatory symptoms); *Canth.* (bloody urine passed in drops); *Nux* (spasmodic pain in the bladder); *Bell.* or *Hyos.* (agonising pain in micturating, from spasm); *Carbo V.*, *Lyc.*, and *Sulph.* (in chronic affections of the bladder and urethra). See the preceding disease.

3.—Difficulty in Passing Urine (*Strangury*).

SYMPTOMS.—In this condition the urine is passed with extreme difficulty, in small quantities or in drops, and is an invariable symptom of the preceding affections; it may also occur independently.

CAUSES.—Spasm of the neck of the bladder; gonorrhœal inflammation; impacted fæces in the rectum; the lodgment of gravel or stone at the neck of the bladder; allopathic doses of Cantharides; exposure to cold, especially in persons of a gouty habit.

TREATMENT.—*Acon.*, *Bell.*, *Camph.*, *Hepar*, *Merc.*, *Nux*, *Puls.*, *Sulph.*

The treatment is the same as for the two preceding diseases. But the age, sex, temperament of the patient, and the cause of the complaint, must be duly considered in selecting a remedy. As a general remedial measure, at the commencement of the difficulty, when little fever exists, and when the strangury is severe, the homœopathic preparation of *Camphor* may first be resorted to. A dose every one to three hours, repeated three or four times.

ACCESSORY MEANS.—It is important to recollect that strangury is not a substantive disease, but a symptom resulting from various causes, the removal of which is necessary before the bladder can regain its healthy sensibility and tone. Bearing this in mind, we can confidently

recommend mucilaginous drinks (see formulæ, page 191), a light digestible diet, and warm hip-baths for local irritation remaining after the cause has been removed.

4.—Incontinence of Urine (*Enuresis*).

In this disease there may be partial or entire loss of power to retain the urine in the bladder. The patient has almost constantly an urgent inclination to pass water, which, if not immediately responded to, results in an involuntary discharge. If the patient is troubled with a cough, the inconvenience is much increased, as during each paroxysm the urine escapes. When the loss of voluntary power is more complete, the urine continues to dribble away as fast as secreted. The constant discharge excoriates the parts, so that the patient can only move about with pain; at the same time an offensive urinous odour is exhaled from the person, thus rendering the condition one of a most distressing character.

CAUSES.—Paralysis of the muscular fibres which surround the neck of the bladder (*sphincter*), which are designed to open or close that organ; this may result from injuries, tedious labours,* the pressure of tumours, calculous deposits, syphilitic diseases, the irritation of worms, or from constitutional causes.

TREATMENT.—*Canth.*, *Cann.*, *Uva U.*, *Nux*, *Puls.*, *Nit. Ac.*, *Calc. C.*, *Rhus*, *Lyc.*

Nux Vomica.—The urine is either retained with difficulty, or passed involuntarily, in consequence of the large quantity secreted.

Cantharis.—Irresistible desire to urinate, and discharge of only a few drops of bloody and acrid urine.

* For urinary difficulties in pregnancy, see "The Lady's Manual of Homœopathic Treatment."

Cannabis.—If sand or gravel appear to excite irritation, and consequent involuntary emissions.

Phosphoric Acid.—If a relaxed condition of the neck of the bladder has been caused by self-pollution. It may be followed by *China* or *Sulph*.

Cina.—Frequent desire and involuntary emission at night, especially if connected with the irritation of *worms*.

Nitric Acid.—Incontinence most troublesome at night; or in patients who have taken much *Mercury*.

Mercurius.—If the disease is traceable to cold, or to syphilis.

Aconitum and *Belladonna* may also be required in inflammatory conditions.

Dose and Administration.—See page 49.

5.—Wetting the Bed (*Nocturnal Enuresis*).

As this condition so frequently exists in children, a brief distinctive notice seems necessary.

CAUSES.—*Irritation of the bladder by worms*; strumous constitution; too large a quantity of fluids, especially warm, or if taken towards evening; improper food or drink, giving rise to acid urine, which *irritates the mucous coats* of the bladder; etc. An examination of the urine of children who wet their beds an hour or two after falling asleep will find it loaded with lithic acid crystals.

TREATMENT.—It is often an obstinate complaint, requiring professional treatment. *Acon.*, *Bell.*, *Canth.*, *Calc.*, *Lyc.*, *Cina*, *Nux*, and *Sulph*. See the preceding article, and “*Materia Medica*.” If *worms* are suspected as the cause of the difficulty, the chapter on that subject should be consulted.

ACCESSORY MEANS.—As incontinence of urine is generally the result of disease, punishing children cannot remove the annoyance, but only suitable medicinal and general treatment, which must be entirely regulated by the cause. All salt,

sharp, and sour articles of food, malt liquors, spirits, tea, and coffee should be avoided. Meat may be eaten in moderate quantities, but only a small quantity of fruit, and no flatulent food. Milk and water, or cocoa, may be taken in the morning, but nothing hot in the after-part of the day. Cold water or mucilaginous drinks may be taken in moderation, as they tend to diminish the acrid properties of the urine. Children who wet their beds ought to sleep on hard mattresses, with light clothing at night, take much exercise in the open air, and have shower baths or daily ablutions with *cold* water. The whole process of ablution, including drying with a rough towel, should not occupy more than five minutes.

6.—Retention and Suppression of Urine.

Retention and suppression of urine, although often confounded together, are very distinct affections. In *retention*, the urine is secreted by the kidneys, but the bladder has lost its power of evacuating its contents; but in *suppression*, the function of the kidneys, which is that of secreting urine, is suspended; the latter, however, is attended with extreme peril, as the urea and other elements of urine accumulate in the blood when the kidneys have fallen into disease, and no longer secrete the urine; the patient becomes uneasy, then drowsy, and soon coma and effusion upon the brain supervene. Suppression may be easily distinguished from retention, for in the latter disease the bladder is distended with urine, and may be felt at the bottom of the abdomen; while, in suppression, the bladder is empty and can scarcely be felt. If it be deemed necessary to introduce the catheter, the diagnosis will be confirmed, for in retention, whether from stricture or enlarged prostate, the bladder will be found full, but in suppression, empty. The diagnosis is referred to here because the treatment should be materially different in the two cases.

CAUSES OF RETENTION.—Acute febrile disease; injury, causing paralysis of the lower part of the spinal cord; loss of tone in the muscular structures of the bladder, leading to paralysis of that organ, common in old age.

TREATMENT.—As the causes of the disease are so various, and their course and progress so diversified, and as life is often jeopardised, the treatment should, if possible, be confided to a homœopathic practitioner.

Aconitum.—Inflammatory symptoms, often in alternation with some other remedy, especially *Cantharis*.

Camphor.—Spasms at the neck of the bladder, especially if caused by *Cantharides* (a drop on a piece of loaf sugar every fifteen minutes for three or four times).

Cantharis.—Urging to pass water, with cutting and tearing pains.

Nux Vomica.—Painful ineffectual efforts to urinate, caused by abuse of wine or spirits.

Sulphur.—In alternation with the last remedy, if the patient is troubled with piles.

Arnica.—Retention from mechanical injury, or the irritation of calculi.

In addition to the above remedies, the following are often useful:—*Cann.*, *Tereb.*, *Uca U.*, *Phos. Ac.*, *Bell.*, *Iod.*, *Ars.*

ATTENUATION.—To persons who have a choice of the attenuations of medicines, the writer recommends the lower in these affections; and the dose to be repeated from one to four hours.

ACCESSORY MEANS.—The introduction of the catheter, so frequently resorted to under the old treatment, is often superseded by the more efficient remedies we employ; still it may be necessary in some cases; but as this requires professional skill, it is useless to refer to it further in this manual. External applications, such as warm baths, hot or cold baths, hot or cold cloths, fomentations, bland

drinks, and injections by the rectum, will greatly aid the medicines in restoring the functions of the parts, if there be not incurable organic disease. The diet must be sparing, and, in some severe cases, restricted to demulcent drinks, such as barley-water, gum-water, etc.

7.—Inflammation of the Urethra (*Urethritis, Gonorrhœa*).

The term gonorrhœa is used to signify inflammation of, and a muco-purulent discharge from, the mucous membrane of the urethra, and of other portions of the genitals in the male, and of the vulva and vagina in the female.

CAUSES.—Gonorrhœa is usually produced from the application of a specific and highly-contagious animal poison during impure or indiscriminate sexual connexion, to the parts implicated. But although the application of infectious matter during an impure intercourse is, undoubtedly, the most frequent cause, yet it is well known that the urethra may become inflamed, and pour out a purulent discharge from connection with a perfectly chaste woman not infected by a third person. Of the truth of this statement we have had ample and decided proofs. The menstrual fluid, profuse or acrid leucorrhœa, or the want of proper attention to cleanliness in the female, may give rise to a discharge having the characteristics, severity, and obstinacy of a specific gonorrhœal disease.

The generally-received opinion is, that gonorrhœa is always the result of sexual intercourse with a person already infected; this incorrect notion has often led to unfounded imputations on the chastity of individuals for which there existed no other ground. The poison of gonorrhœa, then, though by far the most frequent, is but one among many causes capable of exciting inflammation of, and purulent discharge from, the male urethra.

SYMPTOMS.—These have been divided into three stages, the *initiator*y, the *inflammatory*, and the *chronic*. There is, then, first experienced, a tingling or itching sensation, with some degree of heat, at the orifice of the urethra, especially when urinating. The lips of the urethra soon become red and swollen, and on squeezing it a little, muco-pus exudes. As the inflammatory stage sets in there are burning or scalding pains on passing water, with increased secretion from the affected part, at first thin, but soon becoming thick, milky, yellow, green, or even bloody; there is also, during this stage, a good deal of constitutional disturbance, and complications, such as are afterwards mentioned, are prone to arise.

After the disease has continued for about ten days or a fortnight, the chronic stage sets in; the inflammatory symptoms begin to subside, leaving more or less irritation in passing water, and a yellow discharge, which, under unfavourable circumstances, may persist for a long time, and then terminate in an obstinate, thin, transparent, painless discharge (*gleet*); this is especially likely to occur in strumous, phlegmatic, or gouty constitutions, and in patients subject to chronic cutaneous diseases.

COMPLICATIONS OF GONORRHOEA.—(1.) *Irritation, congestion*, or even true *inflammation of the urinary organs*, causing a frequent desire to pass water, but extreme difficulty in doing so; or there may be complete retention of urine. (2.) Frequent, painful, and involuntary erections, crooked and painful, occurring chiefly during the night (*Chordee*). (3.) A thickened and constricted condition of the glans penis, and effusion under it, so that the foreskin cannot be retracted (*Phimosis*). (4.) Inflammation of the lymphatic glands of the groin (*Sympathetic bubo*). (5.) *Inflammation of the testicles (orchitis)*, coming on at a later stage of the disease, when the discharge has nearly ceased, and is

probably an extension of the inflammation from the urethra ; it is marked by pain, greatly increased by allowing the organs to hang unsupported, excessive tenderness, great swelling, fever, and often vomiting.

TREATMENT.—In the treatment of this disease homœopathy offers great advantages over the old system, for her medicines are safe, pleasant, effective, sometimes rapidly so, and do not interfere with the comfort, occupation, or health of the patient. The following list includes undoubtedly the most effective remedies for the internal treatment:—*Acon.*, *Cann.*, *Canth.*, *Apis.*, *Copaib.*, *Merc.*, *Thuja*, *Tereb.*, *Puls.*, *Sulph.*, *Ferrum*, *Capn.*, *Iodine*, *Cicuta*, *Nit. Acid.*

The writer deems it proper here to state, that he has found the ordinary dilutions of the above remedies wholly inefficient in the treatment of gonorrhœa; while, on the other hand, with a selection of one or two remedies from the above list, in a more or less concentrated form, modified by the symptoms and stages of the disease, he has removed the complaint in an almost incredible short period, at the same time that the patient has steered clear of all or most of the usual sequelæ. The following classification may assist the practitioner.

(1.) The *preventive period*, which intervenes between the exposure to the infection and the occurrence of any symptom, averages about three days.

(2.) The *forming stage*, when the symptoms of disease first occur, are slight redness and tingling at the end of the penis, and an augmentation of the natural secretion of the parts. This stage lasts from twelve to forty-eight hours. The treatment in these stages, *before* any acute symptoms have set in, is an astringent lotion, prepared according to one of the following formulæ:—

Argenti nitras, gr. ij ; aquæ des. ℥viij.
Zinci sulph., gr. viij ; aquæ des. ℥viij.

The selection of the lotion, and the frequency of its use, must be determined by the circumstances of the case. A glass syringe, of a suitable size and form, is necessary for the application of the lotion to the diseased surface; also tact and care in the mode of injecting, upon which much of the efficiency of the lotion depends. This proceeding is strictly homœopathic, and if employed early will almost certainly arrest the disease. If, however, *acute* symptoms have set in, it would be a most dangerous course. Avoidance of intoxicating beverages and stimulating food, with quiet and rest, in the *horizontal posture*, will greatly facilitate the cure.

(3.) The *acute* inflammatory stage usually continues from eight to fourteen days, but may be shorter or longer, according to the treatment adopted, and the constitution of the patient. The most useful remedies are:—*Acon.*, *Cann.*, *Canth.*, *Apis*, *Mer. Cor.*, *Copaibæ*. In addition to the administration of one or more of the above, the treatment must embrace moderate diet, linseed-tea, gum-water, barley-water, or similar demulcent drinks, taken *ad libitum*, and, generally, the exclusion of fermented liquors. Also frequent ablutions with warm or cold water, and keeping the parts as free as possible from the irritating discharge. It is probably the infectious nature of this matter which renders the disease so obstinate, for it operates as a continual exciting cause.

(4.) The fourth or *chronic stage* is that form of the disease termed *gleet*. Here also we may employ the local measures before pointed out, together with the internal administration of one or more of the annexed medicines:—*Ferr.*, *Merc.*, *Lyc.*, *Nux V.*, *China*, *Puls.*, *Petro.*, and *Sulph.*

Combined with these remedies, cold baths, or if practicable, sea bathing, regular and early hours, and good but temperate living, are necessary to ensure successful results.

We have entered less fully into the treatment of this than of many other diseases included in this manual, because of its difficult nature, and the annoying consequences which it might entail on the patient, and also by exposing another to the risk of contagion, if the best curative measures are not adopted. In certain constitutions the complaint is sometimes very tedious, requiring a judicious course of medicinal and general measures, such as only long experience can suggest, to eliminate the poison from the system.

CHAPTER VIII.

AFFECTIONS OF THE HEAD.

1.—Various Mental Disorders.

EMOTIONS of the mind, of great intensity, long continuance, or sudden occurrence, are prejudicial to the health in various ways. It might, indeed, seem improbable that material drugs should have power to control mental disorders. We have, however, ample experience to prove that the mind, or the nervous system through which perhaps the mind acts, is most powerfully influenced by medicines. Large quantities of certain drugs produce distressing mental aberrations; and our patients are constantly bearing testimony to the power of properly selected small doses to promote a cheerful and hopeful disposition.

By way of caution, it may be necessary to state that the treatment should be general as well as medicinal, and that as far as possible the cause of the disorder should be removed or modified, if we desire the prescriptions to be completely effective.

1. FRIGHT.—The consequences to the nervous system

resulting from the shock of a sudden fright may be palpitation of the heart, rush of blood to the head, feverishness, headache, etc. Under such circumstances, *Aconitum* is indicated, and should be administered immediately, and repeated every one to three hours for several times, if necessary. Should fright be succeeded by *confusion* or *stupor*, from which the patient can scarcely be roused, *Opium* should be selected in preference to *Aconitum*, and administered in the same manner.

2. GRIEF.—This passion may occasion results both numerous and varied of an unfavourable nature; as a rule the effects of grief or disappointment will be best counteracted by *Ignatia*. A dose thrice daily for several days. If necessary, *Aurum* or *Staph.* may also be considered.

3. PASSION—ANGER.—To obviate any untoward effects from a fit of anger, administer *Chamomilla*, if the subject be a female or child, or *Bryonia* in the case of an adult male. A dose immediately, and repeated from one to three hours. See also *Hyos.* or *Coloc.*

4. DISAPPOINTED LOVE.—To prevent the ill effects it might occasion, *Ign.*, *Hyos.*, *Aur.*, or *Phos. Ac.*, may be had recourse to. A dose of *Ign.* thrice daily for several days; afterwards, if necessary, the same may be continued, or one of the other named remedies substituted.

5. EXCESSIVE JOY.—Joy, if too great, may be hurtful; to quiet the nervous excitement which it occasions, especially in women, children, and delicate persons, *Coffea* should be administered; a dose immediately after the exciting cause, and repeated as may be necessary.

6. MENTAL FATIGUE from prolonged study, or night watchings, especially if combined with the use of stimulants, or too little out-door exercise, requires *Nux Vomica*; a dose thrice daily. In some cases this remedy should be preceded by a few doses of *Aconitum*.

2.—Lowness of Spirits (*Hypochondriasis*).

This is a desponding state of mind, probably due to a disordered condition of blood, functional disease of the liver, stomach, or urinary organs, imperfect secretions, or some cause of exhaustion. Hypochondriasis is especially liable to occur in persons whose social position renders regular occupation unnecessary, or in those who have retired from business to enjoy in repose the fruits of their previous industry; or, on the other hand, it may arise as the result of excessive exertion of the brain or prolonged mental anxiety. The painful operation of this mental condition is forcibly described by Cowper, who when writing to congratulate a friend on his recovery from an acute disease, remarks, “Your illness has indeed been a sad one, causing great distress to yourself, and considerable anxiety to your relatives and friends. But, oh! what are your *bodily* sufferings, acute as they undoubtedly were, to the unceasing *mental* torture I suffer from *a fever of the mind*?”

The hypochondriac is apt to imagine himself the subject of some serious internal disease, and is often haunted with the dread of insanity or of death. The affection bears the same peculiar relationship to the male sex that hysteria does to the female. It should be remarked, however, the patient's maladies may not be *all* fanciful, and his statements and symptoms should be carefully examined by his medical confidant.

TREATMENT.—*Aurum*.—Hypochondriasis with melancholy, which nothing seems to affect; loathing of life, or a suicidal tendency; religious melancholy; uneasiness, apprehensiveness, sullenness, and indisposition to conversation.

Nux Vomica.—Hypochondria associated with affections of the liver; irritability of temper, and inclination to *quarrel*.

Staphysagria.—Melancholy and dissatisfied disposition; indifference; depression, with an irritable, refractory, and repulsive mood.

Ignatia.—Dejection caused by the death of friends, pecuniary losses, disappointments, or any other depressing circumstance.

Pulsatilla.—Patients inclined to weep, and of a quiet and gentle disposition, the reverse of the *Nux* temperament.

China.—Lowness of spirits, with a feeble, impoverished constitution.

ACCESSORY MEANS.—The weary mind should be relieved, and vigour of body and cheerfulness of spirits secured by a course of out-door exercises, physical training, bathing, and suitable dietetic arrangements. Horse exercise is particularly advantageous. If “Indigestion” exists, the article under that heading should be consulted. Hypochondria from sexual vices requires the aid of a physician.

3.—Hysteria.

DEFINITION.—Hysteria is a disturbance of the nervous system, marked by extreme exaggeration of the sensational symptoms, chiefly affecting women, simulating the phenomena of almost any disease the patient may happen to witness or hear described, and presenting consequently a great variety of symptoms, which commonly assume a paroxysmal, convulsive character. It is analogous to hypochondriasis, which affects the male sex.

The term *hysteria* implies the origin of the disease to be in the womb; but the name is inappropriate, as except occasionally, no such connexion exists between the womb and the remarkable symptoms which are described under this term.

SYMPTOMS.—“There are two mental conditions,” says Mr. Druitt, “generally found in hysteria, although they are not

peculiar to it, but belong rather to *invalidism* in general. One is a tendency to imitation, in which the patient believes she is afflicted with any disease whatever which may strike her imagination, or which she chances to hear of, or which is the subject of general conversation. The other is a diseased egotism, which makes the patient delight in being ill, so as it secures the undivided attention and sympathy of those about her. This is at the bottom of those marvellous and otherwise unaccountable tricks which hysteric patients resort to in feigning disease."

Hysterical symptoms may be grouped under three classes. First, that in which the sensation of a ball rising in the throat (*globus hystericus*), or in which a feeling of suffocation is experienced by the patient, but without convulsions; second, its paroxysmal form, in which the sensation of a ball rolling in the stomach or chest, gradually rises to the throat, where it produces a choking sensation, and panting breathing; this is succeeded by partial insensibility, shrieks and screams, irrepressible crying or laughter, convulsions, etc.; third, those irregular forms which often arise in the intervals of severe attacks. Hysterical paroxysms most frequently occur about the menstrual period.

Hysteria is remarkable for the wide range of symptoms it may occasion, and the multitudinous diseases it may mimic; we may instance, especially, stricture of the œsophagus, laryngitis, pleurisy, neuralgia, loss of voice, difficulty in passing water, a barking cough (more annoying to the hearer than to the subject), disease of the spine or joints, and many other inflammatory diseases. In these cases the patient deceives herself, and endeavours by extreme statements of her sufferings to mislead others. An observant medical man, however, need never be deceived. In addition to the diagnosis referred to in the next paragraph, even the external conformation of the features may be referred to as

often sufficient to indicate the existing tendency. The "*facies hysterica*" may be recognised by the remarkable depth and prominent fulness of the upper lip, which is more or less thick. There is also a fulness of the eye, with a tendency to drooping of the upper eyelids (*Aitken*).

HYSTERIA AND INFLAMMATORY DISEASES.—Although a medical man may for a moment experience difficulty in deciding whether a patient is suffering merely from hysteria, or from a serious disease, he is able by the use of the Thermometer to determine the point. The temperature of patients in acute inflammation is invariably raised; but the temperature of hysterical persons is always natural (98° Fahr.). Thus we possess in the thermometer a sure means of diagnosing between these conditions. If the temperature be normal, the patient is not the subject of acute inflammatory disease. Further, the state of the pulse, the intermittent character of the pains, and the general integrity of the nutritive processes, furnish additional proofs of the real character of the disease.

EXTENT OF HYSTERICAL AFFECTIONS.—

"You may deem them," says Mr. Skey, "to be exceptional. I assure you they constitute the rule of disease, and not the exception. *Real disease is the exception.* Speaking of one variety, and they have all characters in common, Sir B. Brodie says, 'I do not hesitate to declare that, among the higher classes of society, at least four-fifths of the female patients who are commonly supposed to labour under diseases of the joints, labour under Hysteria and nothing else.' I would venture to enlarge this statement as regards the 'upper classes,' by including a large proportion of the lower; for much of my own experience of Hysteria has been obtained from the wards of St. Bartholomew's Hospital; and in reference to spinal affections in young persons, I unhesitatingly assert that real disease is not found in a greater proportion than one case in twenty, and even this is a liberal allotment."

Respecting supposed cases of diseases of the spine, the same gentleman remarks,—

“Thirty or forty years since these cases were, happily for our time, far more common than at present. At that date, and for how many years anterior I know not, all the sea-side towns were crowded with young ladies between 17 and 25 years of age, and beyond it, who were confined to the horizontal posture, and were wheeled about on the shore in Bath chairs, on the supposition that they were the subjects of spinal disease. They were placed under much medical and dietetic discipline, not of the most invigorating character, and the large majority carried a pair of handsome issues in the back! Brighton, Worthing, Hastings, and other places on the South Coast were largely tenanted by these unfortunate females, to which a moderate sprinkling of young gentlemen was added. What has become of all these cases? They appear to have vanished just in proportion as the eyes of the surgeon have opened to the absurdity of inferring that pain alone which locates itself with remarkable precision in Hysteria on a given vertebra can indicate the presence of organic disease of the body of the bone without collateral evidence in its favour. When the spinal column is really diseased the case is obvious at a glance; the health is degenerate, and the whole system proclaims to the eye of the surgeon the presence of a great evil. These examples are but a miserable mockery of the reality, and a fraud on the judgment of the ignorant.”

HYSTERIA AND EPILEPSY.—There are some points of resemblance between hysteria and epilepsy, but the following will be sufficient to distinguish between these affections.

In *epilepsy* there is entire loss of consciousness; in *hysteria* it is seldom complete, never occurs at the outset of a fit, and the patient is able, although she does not always choose, to repeat observations made at the time. In epilepsy, the face is usually livid, the patient foams at the mouth, the expression is frightful, and the convulsive movements are often more marked on one side than the other; symptoms which are not present in fits of hysteria. An hysterical attack is less severe than an epileptic, and is not followed by profound sleep, nor is the tongue bitten. Hysteria is not only almost entirely confined to women, but chiefly to that period of their life in which the sexual functions are, or should be, fully developed and in their greatest vigour.

CAUSES.—Natural or acquired feebleness of constitution; mental suffering; and derangements of the sexual system, such as profuse menstrual or leucorrhœal discharges, delayed development of the generative organs, or too strong sexual propensities. The unmarried are most liable to the disease, and those who suffer from “Amenorrhœa” or “Menorrhagia;” when married women suffer it is usually just after conception, or before childbirth, or afterwards, as the result of prolonged nursing. Although essentially a disease of a nervous nature, it is easily excited into activity by any circumstance that operates powerfully upon the economy, like suppressed, irregular, or profuse menstruation, leucorrhœa, depressing emotions, fright, the loss of a husband, child, or friend, disappointed love, novel reading, and a luxurious mode of life. Persons whose circumstances do not compel them to be industrious, and can command the attendance of the physician and the sympathy of friends, often fail in that mental resolution which is necessary to throw off the sensations of lassitude and unreal fatigue. Such a person often says she is tired, and could not walk another step. She even thinks so; and without any inducement does not call into exercise that reserved fund of physical strength which is so rarely exhausted. Poor persons cannot afford this indulgence, and by putting forth energy resist the sensations.

TREATMENT.—This includes the measures necessary to be adopted during a fit, and those in the intervals. During a fit, the patient's clothes should be loosened; she should have abundance of fresh air, and be prevented from injuring herself. The sudden, copious, and continuous application of cold water to the head and face will be almost certain to cut the fit short. There is more virtue in cold water than in any other single remedy. In hospitals the practice is often adopted, to draw the head quite over the side of the bed, and pour on it from a considerable height a large quantity of

water out of a pail, jug, or other large vessel, directly over the mouth and nose of the patient, so as to arrest her breathing and force her to open her mouth. Previous to the adoption of this practice, three or four patients might be seen simultaneously in the same ward in an hysterical paroxysm. Now, however, hysterical fits are rare, and seldom happen twice in the same person, and never become epidemic (*Watson, Aitken*).

Mr. Skey states that, on one occasion, nine young women were affected at the same time; some of them so violently as to call for the assistance of sisters, nurses, and other servants; and as a person under the influence of hysteria brings into action all the *latent* strength of her muscular frame, which is greatly in excess of her *apparent* strength, the services of these attendants were scarcely sufficient. The attack commences in the person of a girl, the subject, perhaps, of a trifling operation, or under the influence of mental emotion. No sooner is this condition observed by her fellow-patients, than it spreads from bed to bed, the others taking the disease in the order of their constitutional liability.

These curious attacks, though they appear to the subjects of them irresistible, are yet but the result of what has been termed a *surrender*, and might be prevented by an adequate motive. The mode adopted to arrest the malady consists in making some strong and sudden impression on the mind through the medium of, probably, the most potent of all impressions, *fear*. Sympathy, kindness, tenderness of voice and manner, aggravate rather than mitigate the evil. On two occasions a few quarts of cold water suddenly thrown on the person of a chief delinquent, instantly brought the ward to a state of reason and tranquillity, the disease succumbing to the indignity of the treatment.

On standing by the bedside of a patient in a paroxysm,

advantage may be taken of her apparent unconsciousness, by speaking in a subdued voice, but sufficiently loud for her to hear, of some mode of action which she will be certain to disapprove of, especially the free use of cold water, and the very mention of which may be sufficient to terminate the fit.

If there is coldness of the surface, two pilules saturated with the strong preparation of *Camphor* may be given every few minutes during the fit, or the strong tincture may be applied to the nose.

In the intervals, the following medicines and general treatment may be resorted to, according to the symptoms present.

REMEDIES :—*Ign.*, *Cocc.*, *Plat.* ; also *Puls.*, *Valer.*, *Staph.*, *Bry.*, *Nux.*, *Aur.*, *Bell.*, *Hyos.*, *Cham.*, *Sep.*, *Mosh.*, *Stram.*, *Verat.*

Ignatia.—This is generally a valuable remedy when the temperament of the patient corresponds, particularly in hysteria from disappointment, mortification, or any intense mental excitement, with hysterical convulsions, the sensation of a ball rising in the throat, or a suffocative constriction and difficult swallowing, or a feeling as of a nail penetrating the brain. If necessary, it may be followed by *Hyoscyamus* or *Aurum*.

Cocculus.—Hysteria with a weeping or irritable mood; dejection, especially in the afternoon; uterine spasms, with suppressed or irregular menstruation; profuse discharge of watery urine; leucorrhœa; fainting fits; etc.

Pulsatilla.—Hysteria evidently depending upon, or associated with, suppressed period or uterine disorders, especially when the *Puls.* temperament corresponds. It may be followed by *Sabina* or *Silicea*.

Platina.—Congestion to the uterus; too early, profuse, or too prolonged menstruation, preceded by bearing-down,

labour-like pains ; melancholy, anxiety, trembling, or nervous debility. This remedy is well suited to the spasmodic affections of hysterical persons of an irritable, sad, peevish, or reserved disposition, and to those of proud and haughty manners.

Valeriana.—Mental excitement, visual illusions, a dreamy tendency, agitation, and occasionally spasmodic movements ; alternate mirthfulness and dejection ; dyspeptic or heart symptoms, such as are complained of by hysteric persons. The provings of this drug show its special adaptation to numerous forms of hysteria.

Nux Vomica.—Hysteria arising from torpid action of the bowels, with disagreeable taste in the mouth ; bitter or acrid eructations, flatulence, hiccough, distension and pain in the stomach, headache, giddiness, faintness, and tendency to convulsions. After administering it for several days, *Sulphur* may be substituted.

ACCESSORY MEANS. — Crowded and heated churches or rooms, theatrical exhibitions, novel reading, tight stays, and late hours, both in retiring at night and rising in the morning, should be imperatively forbidden. At the same time, the following directions cannot be too strongly insisted upon, as absolutely necessary in the removal of the affliction. The daily use of the shower-bath ; regular out-door walking exercise ; cheerful society and conversation ; and physical and mental occupation, of a useful character. Healthy, useful employment should become a uniform habit, and the patient made to feel that life is not a mere holiday to be spent in gaiety, frivolity, and idleness, but a most important period of existence, every day of which should be passed in active usefulness.

4.—Delirium Tremens—Brain Fever of Drunkards (*Ebriositis*).

DEFINITION.—This disease is essentially one of exhausted cerebral and nervous power, from the excessive use of alcohol in its various forms, the most prominent feature being a suspicious, but generally controllable, *delirium*, with *tremors*, *sleeplessness*, frequent pulse, furred tongue, and a cool moist skin.

EFFECTS OF THE INTEMPERATE USE OF ALCOHOL.—The physical action of alcohol when taken in large, or in frequent small, quantities, not only tends to impair the coats of the stomach, but even when taken considerably short of producing any marked effect on the nervous system, may interrupt the process of absorption, and consequently of nutrition, and thus insidiously lay the foundations of irreparable disease. The first pernicious result of the introduction of spirituous liquors into the stomach is the coagulation of all albuminous portions of food or fluid with which they come in contact. This coagulation is very different from the physiological one effected by the gastric fluids, and in fact, tends to render the substances more difficult of solution by the gastric juice; changes, partly of a chemical and partly of a vital nature, are induced; the general nutrition of the body suffers, and if the habit is persisted in, an incurable cachexia results.

The effects of alcohol on the brain is very marked and disastrous when taken daily, though to an extent short of producing intoxication.

“The functions of the nervous system are more or less imperfectly performed. The want of a proper controlling influence of the nervous centres is seen in the trembling hands and shambling gait; the brain, through over-excitement, is under-nourished, and there is a want of intellectual power and decision of will. Sleep, the great

restorer of nervous power, is irregular and disturbed; the membranes of the brain become congested, and there is headache; giddiness also frequently occurs on any sudden movement. The intellectual functions are sometimes greatly disturbed, and hallucinations of various kinds are observed. The feelings also become blunted and perverted. If timely warning is not given and taken, derangement more or less complete of the cerebral functions comes on, and the person becomes insane. The records of our lunatic asylums afford abundant evidence of the fact, that undue indulgence in alcoholic beverages is a frequent cause of insanity" (*Lancaster*).

SYMPTOMS OF DELIRIUM TREMENS.—The disease may only appear after a long course of alcoholic stimulation, or it may be suddenly developed after a protracted debauch. The earliest symptom is one of great mental and physical depression. The patient is pale and chilly; he fancies he is haunted by spectres, and is afraid to be alone. A state of excitement and delirium follows, in which he becomes the victim of various painful delusions, chiefly having reference to his business, which he thinks is irretrievably ruined, or to his friends, whom he believes are plotting against him. The delirium is of a timid, suspicious, jealous nature; he suspects everyone around him, is constantly talking or muttering, and, haunted by spectral illusions and imaginary horrors, he desires to get up, and often makes violent efforts to flee from foes and danger. Sleep almost wholly forsakes him; he becomes restless in the extreme, trembles all over, and is frequently endeavouring to change his place or posture; he moves his hands over the bed-clothes, and declares that rats, mice, beetles, etc., are about or under them, that strangers are in the room, or will insist upon getting into his bed, or that listeners are at the door or concealed behind the curtains. The patient is, however, easily subdued, and induced to remain quiet, at least for a time. His eyes are very restless, and the conjunctivæ are red and injected; his face pale, but sometimes flushed and

wild-looking; his skin is commonly moist or clammy; his pulse weak and compressible, the action of the heart is often violent, and there is entire loss of appetite.

“All these symptoms indicate a brain thoroughly disorganised, and, in a large number of cases, the disease proceeds till coma or convulsions terminate the existence of the unhappy victim. That this disease is entirely dependent on the action of alcohol is seen by the fact, that, in cases of recovery, the symptoms subside just in proportion as the alcohol is given time to pass out from the system. So dependent are the symptoms of this disease on the want of sleep, that it would appear that the alcohol acts on the brain by over-stimulating it and preventing that rest in sleep which is necessary for its nutrition. The delirium is generally arrested when the patient gets sleep, hence the general practice of medical men in this disease is to give *opium* till sleep is procured; at the same time, it has been shown, that by waiting till the alcohol gets out of the system, natural sleep comes on, and the affliction disappears without the administration of opium at all. This fact is a very important one, as there is not wanting evidence to show that the administration of opium may hasten that comatose state in which the patient is sometimes carried off” (*Lancaster*).

DIAGNOSIS.—The character of the pulse, skin, and tongue is sufficient to distinguish the disease from inflammation of the brain or its membranes; the pulse is frequent and soft; and the skin and tongue are moist, the latter being covered with a white fur.

CAUSES.—Excessive, long-continued excitement, most frequently from the use of spirituous liquors, wine, or beer. The habitual use of opium or other narcotics, or even extreme and prolonged mental excitement, often produce an analagous affection. According to some writers, delirium tremens sometimes sets in as the result of the *sudden withdrawal* of the accustomed stimulants; but this is an error. The occasional development of the disease under this circumstance is known to be nothing more than a coincidence. The experience derived from hospital practice, or from prison

discipline, abundantly proves that a person who indulges very freely in stimulants may suddenly abandon them without any risk. Indeed, as with other poisons, the great danger to be feared arises from their continued employment.

TREATMENT.—*Nux*, *Opi.*, *Hyos.*, *Stram.*

Nux Vomica.—Pain in the pit of the stomach; pale or bloated countenance; spasmodic vomiting of bile; desire to be in the open air; unimpaired consciousness. This remedy, if administered early, will often arrest the disease.

Opium.—Stupefaction; gloomy or suicidal feelings; frightful or fantastic visions; moist, cold skin; tremor; grasping at imaginary objects.

Belladonna.—Delirium; red, flushed face; congested or swollen eyes, with sparks before them; tongue and mouth red, hot, and dry; thirst; starting suddenly from sleep; suppressed secretions. It is particularly adapted for the delirium of patients of a full plethoric habit, with a tendency to congestion of the head.

Stramonium and *Hyoscyamus* are useful in cases complicated with convulsive movements; epileptic paroxysms; muttering delirium; suppression of the secretions; and in extremely irritable, noisy, and unmanageable patients.

ACCESSORY MEANS.—Skilful, careful nursing is of the first importance. The patient must not be left one moment alone, and restraint, if necessary, should be of the gentlest nature, and not exercised an instant beyond the requirements of the case. The patient should remain in a quiet, darkened room, and everything be done to induce sleep, and obviate mental irritation.

DIET.—The immediate cause of danger is from exhaustion; hence the importance of supporting the strength by nutritious, digestible diet, in a fluid form,—beef-tea, soups, yolk-of-egg, etc., in small quantities frequently repeated. “The stimulus of such a spice as *cayenne pepper*, given in soup, on the

atonic stomach, will have a favourable influence on absorption" (*Aitken*). A cup of coffee is sometimes useful to quiet the nervous excitement. If sleep was not procured, nor nourishments administered, the patient would sink and die from exhaustion.

5.—Epilepsy (*Epilepsia*).

DEFINITION.—This condition is characterised by sudden and complete loss of consciousness and sensibility, with spasmodic contractions of the muscles; a seizure lasts from two to twenty minutes, recurs at variable intervals, and is followed by exhaustion and sleep.

The suddenness of an epileptic attack is very characteristic, and is expressed in the name of the disease, which literally means a *seizure*; so that almost in a moment, the patient falls to the ground, struggling, foaming, and insensible. "This disease has been known from the earliest antiquity, and is remarkable as being that malady which, even beyond insanity, was made the foundation of the doctrine of possession by evil spirits, alike in the Jewish, Grecian, and Roman philosophy" (*Aitken*).

SYMPTOMS.—Here we may include those which *precede*, those which *attend*, and those which *follow* an attack. The *symptoms* which PRECEDE a fit are sometimes, but not in the majority of cases, sufficient to warn the epileptic of what is approaching; they vary both in character and duration; sometimes being too brief to allow the patient to remove from the fireplace, the edge of a precipice, or the vicinity of water, to dismount from horseback, voluntarily to lie down, or even to intimate to those around him what is about to happen. In other instances, an approaching seizure is clearly indicated for many minutes, or even hours, before its actual occurrence. The kind of warning is very variable in different cases, often consisting of such symptoms as head-

ache, giddiness, indistinctness of vision, irritability, gloomy mood, spectral illusions, etc. Dr. Gregory, of Edinburgh, was informed by a patient of undoubted veracity, that in his case an attack was always ushered in by an illusion in which he saw a little old woman in a red cloak advance towards him, and strike him a blow on the head, on receiving which he immediately lost all recollection and fell down. But the most striking premonition is that called the *aura epileptica*. This is a sensation which is variously described by different patients; thus it is likened to a stream of warm or cold air, to the trickling of water, or to the creeping of an insect. The sensation commences at the extremity of a limb, and gradually runs along the skin towards the head; or, occasionally, it gets no further than the pit of the stomach; and, as soon as it stops, the fit occurs. A knowledge of these circumstances is of considerable importance, as it respects the comparative safety of the patient during an attack, and, also, in some instances, time is afforded to interpose remedies that may avert the paroxysm.

AN EPILEPTIC FIT.—An epileptic seizure is sudden; the patient, apparently in the enjoyment of sound health, utters a loud piercing shriek or scream, and falls suddenly to the earth, convulsed and insensible. The cry, which is frequently, but not invariably uttered, is so peculiar and terrifying, that women are often thrown into hysterics on hearing it. “On one occasion,” Dr. Cheyne states, “a parrot, himself no mean performer in discords, dropped from his perch, seemingly frightened to death by the appalling sound.” During a fit, the convulsive movements, especially of the head and neck, are often very extreme, one side being frequently more affected than the other; there is violent closure of the jaws; the tongue is liable to be protruded and bitten; a foam issues from the mouth, often coloured by blood; the *eyes quiver* and roll about, and sometimes are fixed and

staring; the hands are firmly clenched, and the thumbs bent inwards upon the palms; fæces, flatus, semen, and urine sometimes escape involuntarily; the breathing is impeded, and performed with a hissing sound and a spasm of the larynx; the cheeks and lips become purplish and livid, and the veins of the neck and forehead are greatly distended, the heart acts tumultuously, and death seems inevitable. Gradually, however, there is a remission of these terrible symptoms; and the patient is left insensible and apparently in a sound sleep, from which he recovers confused and exhausted, having no knowledge of anything that has passed.

SYMPTOMS FOLLOWING A FIT.—Some few patients recover perfectly in a few minutes; some regain consciousness and then sink into profound repose; but more frequently patients do not recover consciousness upon the cessation of the convulsions, the slumber succeeding the struggles without any lucid interval. On emerging from the slumber, the patient may merely feel languid and inert, or like a person stunned, or in a state bordering upon idiocy.

CONSEQUENCES OF EPILEPSY.—Repeated attacks of a severe kind are liable to enfeeble the memory, impair the intellectual faculties, and in some instances, unhappily, terminate in irremediable imbecility. It is the liability of such a termination as this that invests the disease with such painful interest. “Every successive attack strengthens the *habit*, and renders the individual more obnoxious to future seizures” (*Siercking*).

CAUSES.—These are very varied, but doubtless the most frequent is hereditary tendency. It is well known that epilepsy is most frequent in confirmed lunatics and idiots, as the result of some malformation of the brain. Injuries of the skull, such as fracture, tumours, inflammations, and malformations of the skull, as one half being unlike the

other, abnormal, osseous deposits within the cranium, especially spiculæ of bone formed on the inside of the *dura mater*. In *post-mortem* examinations, the bones of the head are sometimes found thickened or otherwise diseased. The most frequent *exciting causes* are, derangement of the nervous or sexual systems; immoderate sexual indulgence, as well as too prolonged abstinence from sexual intercourse; self-abuse, and prostration of nervous power from any cause.

“The most powerful predisposing cause of any, not congenital, is masturbation—a vice which it is painful and difficult to allude to in this manner, but still more difficult to make the subject of inquiry with a patient. But there is too much reason to be certain that *many* cases of epilepsy owe their origin to this wretched and degrading habit; and more than one or two patients have voluntarily confessed to me their convictions that they had thus brought upon themselves the epileptic paroxysms for which they sought my advice.”*

We may enumerate fright, fits of rage, derangements of the digestive organs, the irritation of worms, menstrual difficulties, repelled eruptions, especially those about the head, and the sight of other epileptics, as additional exciting causes.

DIAGNOSIS OF FEIGNED EPILEPSY.—Impostors often feign epilepsy with the view of exciting charity; but two or three circumstances will generally lead to their detection. 1.—In epileptic seizures, *the eyes* are partly open, and the eye-ball may be seen rolling and distorted; an *impostor* almost always performs with closed eyes, and, if narrowly watched, may be seen now and then to open his eyes, to learn the effect of his exhibition upon the bystanders. 2.—*The skin* during an epileptic paroxysm is usually cold, but that of an exhibitor is hot and perspiring, manifestly the result of his severe voluntary efforts. 3.—The genuine sufferer, if he has

* Sir Thomas Watson, M.D.

any signs of an approaching attack, selects a retired spot, or his own house; the impostor selects a crowded thoroughfare as the most suitable place for a performance, and never his own home; at the same time avoiding situations in which he is likely to sustain any personal danger. Lastly.—In true epilepsy the patient is insensible to external impressions; it is quite otherwise with the feigned, and hence pressing the thumb-nail violently under that of the supposed impostor, which causes severe pain without serious injury, often leads to the detection of the sham. Mr. Hutchinson relates the case of a sailor who was suspected to be a cheat, in whom the convulsions were instantly removed by blowing some fine Scotch snuff up his nostrils through a quill. This brought on *another* kind of fit—a fit of *sneezing*, which lasted nearly an hour; and there was no return of epilepsy so long as Mr. Hutchinson remained in that ship. The same expedient was tried in cases of *real* epilepsy, but without producing any similar results. There was a beggar in Paris, who often fell into epileptic fits in the street; one day some compassionate spectators, fearing that he might injure himself in his struggles, obtained a truss of straw and placed him upon it: but when he was at the height of his paroxysm, and performing remarkably well, they set fire to the straw, and he presently took to his heels.

TREATMENT DURING A FIT.—The patient's tongue should be put back into his mouth, and a linen pad or cork fixed between his molar teeth; he should be laid on a bed or rug, fresh air freely admitted around him, his head slightly raised, and all ligatures relaxed that interfere with circulation and respiration. Throwing cold water on the face appears to do no good; and restraint should not be exercised beyond what is necessary to prevent exposure or to guard against falls or injury. In cases preceded by the *aura epileptica*, a firm ligature applied above the part where the

sensation is felt, is said to prevent the attack. After the fit, the patient should be allowed in comfort to pass the period of sleep which usually follows.

TREATMENT BETWEEN THE FITS.—In addition to the administration of one or more judiciously-selected remedies, an endeavour must be made to discover some exciting cause of the malady, and then to attempt its removal. If possible the patient should be under the care of a homœopathic physician.

Belladonna.—Great irritability of the nervous system, the patient starting at the least noise; tremor, and twitchings of the muscles; unnoticed escape of fæces or urine; sparkling of the eyes, intolerance of light; stammering; congestion of blood to the head; also when the disease occurs during teething. If administered as soon as the earliest indications of an attack present themselves, if not sufficient to entirely stave it off, it will in all probability mitigate its severity. *Stramonium* may often advantageously follow *Belladonna*, or be alternated with it. After an attack, a dose may be given every six hours, for two or three days.

Cuprum.—Commencement of the symptoms in the fingers, toes, or arms, moving towards the head, until there is loss of speech and consciousness; salivation, flushed face, and red eyes; recurrence of the fits about every month, especially in females at the menstrual period.

Ignatia.—The patient is nervous, sensitive, and pale; great anxiety and deep sighs precede the attacks; daily paroxysms; and when violent grief or injured feelings seem to bring on a fit.

Nux Vomica.—Indigestion, constipation, and ill-humour between the fits; the patient takes too little out-door exercise; epilepsy associated with prolonged indulgence in intoxicating beverages.

Opium.—Epilepsy caused by fright; also if the patient

falls down with a cry, after which deep sleep and stertorous breathing come on. If, after a fright, the symptoms point to *Belladonna*, *Opi.* and *Bell.* may be given alternately.

When the disease occurs as the consequence of inebriating drinks, with the above symptoms, *Opium* and *Nux Vomica* will often effect a cure, providing the intemperate habit is permanently reformed.

Phosphorus.—Epilepsy from onanism, or sexual abuse of any kind. If the habit in question is discontinued, the judicious employment of this remedy, or any other indicated, may be of great service.

China.—For some patients this remedy may be selected instead of, or after, *Phosphorus*.

Chamomilla.—Epilepsy in children; when the attack is caused by anger, preceded by colicky pains, and followed by sudden stretching of the limbs and clenching of the thumbs; the attacks are often accompanied by sour vomitings, paleness of one cheek and redness of the other.

Cina.—If the affection is attributable to the irritation of worms.

Sulphur.—Chronic epilepsy; or when the disease is connected with the suppression of an eruption or discharge; it is especially suitable for scrofulous persons.

One of the following remedies may sometimes be required:—*Stram.*, *Stan.*, *Cocc.*, *Calc. C.*, *Silic.*, *Caust.*, *Agar. Musc.*, *Valer.*, *Verat.*, etc.

Dr. Marcey states that if the paroxysms have been caused by fright, grief, chagrin, or from some other sympathetic emotion, we may often prevent an attack (homœopathically) by exercising the patient with some more potent mental influence, which shall supersede the original cause. It was upon this principle that Boerhaave cured a number of epileptics, at the hospital for orphans of Haarlem, who had been attacked in consequence of fright, from seeing an

epileptic brought into the hospital during a paroxysm. In these instances he had a red-hot poker kept ready, in order, as he assured these girls, that he might apply it to their heads as soon as there was any indication of an attack. The fright caused by this *idea* entirely overwhelmed the other cause, and cure was the general result.

Dose and Repetition.—See page 49.

ACCESSORY MEANS.—Regular healthy exercise is beneficial, but it should never be carried too far, as fatigue often excites an attack. Epileptic patients require much rest. Plain food of a nourishing kind, in moderate quantities; cold ablutions every morning, and cheerful company. Patients having a tendency to plethora or congestion, should entirely avoid stimulants; also violent emotions, excesses of every kind, more especially sexual, and the inordinate use of food and drink. The treatment of epilepsy occurring in children during teething, is precisely similar to that recommended in the section on “Infantile Convulsions,” and is almost uniformly successful.

6.—Hydrophobia (*Rabies*).

This terrible malady gives rise to great sufferings, and almost universally terminates fatally. Its chief characteristics are, severe constriction about the throat, spasmodic action of the diaphragm; a peculiar dread of fluids, and difficulty of swallowing them; anxiety and restlessness; and exhaustion, delirium, and death. Although incurable, we will offer some suggestions, which, if acted upon, may prevent the accident which gives rise to this disease, or render it comparatively harmless.

Hydrophobia generally occurs as the result of a bite of a rabid dog, or simply from its licking an abraded portion of

the skin;* and as "prevention is better than cure," we will first point out the

SYMPTOMS OF RABIES IN THE DOG.—The earliest symptoms, according to Mr. Youatt, are unusual sullenness, fidgetting, and frequent shifting of posture; loss of appetite; lapping his own urine, and disposition to lick cold surfaces, such as stone and iron; to eat straws, *litter*, *excrementitious* matter, and other rubbish, and fighting with his paws at the corners of his mouth.

A very early and constant symptom is *change of voice*. Every sound uttered by a rabid dog is more or less changed, but there are two in particular; one being a hoarse inward bark, with a slight elevation of tone, and another a perfect bark, ending abruptly, and very singularly, in a howl, a fifth, sixth, or eighth higher than the commencement.

The amount of *ferocity* in rabid dogs varies; some, showing extreme fondness, are perpetually trying to lick the hands and face of those they know, whilst others snap and bark, and rush to the end of their chain to meet an imaginary foe; or if loose, rush out, biting every one they meet. There is no *dread of water*, as in human beings, but, on the contrary, great thirst, which the animal tries to appease by lapping as long as he has power over his jaws; or when paralysis of the muscles of the mouth and jaws occurs, the poor creature plunges his muzzle into water up to the very eyes, in order to convey fluid to his parched mouth and throat. When the disease is fully matured, there are delirium, more or less ferocity, alteration of voice, distressing thirst, and viscosity of the saliva, which adheres

* The following accident, narrated by Mr. Lawrence, shows the impropriety of permitting caresses from a dog. "A lady had a French poodle, of which she was very fond, and which she was in the habit of allowing to lick her face. She had a small pimple on her chin, of which she had rubbed off the top; and allowing the dog to indulge in his usual caresses, he licked this pimple, of which the surface was exposed. Thus she acquired hydrophobia, of which she died."

to the corners of the mouth, causing great annoyance. In the last stages of the disease, the eyes become dull; the hind legs, and afterwards the muscles of the jaw, are paralysed; and the poor dog dies exhausted, in from four to six days. Next to the dog, probably the wolf, the fox, the jackall, and the cat, are most liable to hydrophobia.

CAUSES.—Close confinement, want of fresh water, unwholesome food, sudden changes from heat to cold, and unsatisfied sexual desires. Male animals are more frequently affected than female. The most common cause in dogs is a bite from another animal already affected with hydrophobia. It is asserted and generally believed in India, that rabies never originates in dogs, but can always be traced to a mad jackall or wolf entering a village or town, and biting the dogs.

HYDROPHOBIA IN MAN.—Hydrophobia is always the result of contagion, either from a bite or from a rabid animal licking some abraded surface of the body. A bite is less dangerous when inflicted through clothing, than on an exposed part of the body, as the teeth are wiped, and the poison may be arrested by the clothes. Hence many persons may be bitten by the same rabid animal, but not more than one or two fall victims to hydrophobia.

SYMPTOMS IN MAN.—These are not manifested till a period after receiving the infection, varying from about six weeks to three months, possibly extending to one or two years; the wound having probably healed, and the scar presenting no remarkable appearance. Shooting pains of a rheumatic character, and twitching and itching sensations are sometimes felt in the vicinity of the wound prior to an attack. Sometimes there is stiffness, or numbness, or partial palsy; or the wound may be red and swollen; there is an indistinct feeling of uneasiness and anxiety, with giddiness, chills, *heats*, and a general feeling of being unwell. The special

symptoms are arranged by Mr. Erichsen under three heads; consisting (1) of a *spasmodic affection of the muscles of the throat and chest*. The act of swallowing commonly excites convulsions, and the recollection of these sufferings makes them afraid to repeat the attempt; hence that horror of all liquids which is so remarkable a feature of the disease. There is also a catch in the breathing somewhat resembling that which is experienced when an individual plunges into a cold bath. (2) *An extreme degree of sensibility of the surface of the body*, probably the most marked symptom. The cutaneous nerves become so sensitive that the gentlest current of air, the movement of the bedclothes, the opening or shutting of the door of an apartment, the reflection of light from a mirror, a sound, or even a look, is sufficient to bring on the convulsive fits. (3) *Mental agitation and terror* is another early and persistent symptom. Profound despair, with a horror and dread at the impending fate, frequently marks the disease throughout. Delusions of a spectral character often prevail, the patient fancying himself surrounded by horrid forms; these delusions may alternate with maniacal fury; and occasionally, but rarely, mental composure may prevail. To these symptoms we may add, extreme thirst; the secretion of a remarkably viscid saliva, the effort to discharge which brings on the convulsive fits; sometimes there is vomiting; the convulsions increase in frequency and violence; the lips and cheeks become livid, and perpetually quiver; till, at length, one fit lasts long enough to exhaust the remaining strength, and death releases the patient from his misery.

TREATMENT.—This must be chiefly of a palliative character, for the cure of the disease, when once established, seems in the present state of our science an almost hopeless attempt.

Immediately after a person has been bitten by a sus-

pected animal, the wound should be sucked with all the force the patient can command; and if he is too much alarmed or otherwise unable to do it himself, a friend should do it for him. As soon after this as possible, a surgeon should excise* the wounded part, care being taken to remove every portion touched by the animal's teeth, and to obtain a clean raw surface. The wound must then be washed by a stream of warm water, and, afterwards, the nitrate of silver freely applied. The patient should be put under chloroform, so as to enable the surgeon deliberately and effectually to carry out these necessary measures. Should the above means be neglected many days, or even weeks, excision may be performed at any time before the disease appears, or even immediately after the first symptoms manifest themselves; although they would then be done with less hope of a successful result. No measures should be regarded as superfluous which offer any possible chance of escape from so fearful a malady.

The chief homœopathic remedies are:—*Belladonna*, *Cantharis*, *Hyoscyamus*, and *Stramonium*. These medicines are on no account to supersede the local means just pointed out, but to follow them, as further preventives, and also to be used as palliatives, should the disease unhappily break out.

Belladonna, according to Hahnemann, is the most sure preventive against hydrophobia; and certainly no other drug has the power of simulating the disease to the same extent. Several very interesting cases of genuine hydrophobia, said to have been cured by this drug, are quoted in Hempel's new "Materia Medica," (page 337–342, American

* Youatt objected to *excision* because he said the point or blade of the instrument used was apt to be touched by the virus and thus infect the sound parts. He recommended the free use of caustic, which decomposed the virus, and formed a sort of cake enveloping it. He had himself been bitten many hundred times by rabid dogs without infection, having always used caustic; nor did he think it scarcely ever too late to take this precaution.

edition). As palliatives in this disease, we may further mention the inhalation of chloroform, the use of opium, the application of ice to the spine, etc. Even if a cure is out of the question, still it is an important point to afford some mitigation to the severe sufferings which attend this disease.

PRECAUTIONS AGAINST HYDROPHOBIA.—“I think it right,” says Dr. Sumpter, “to call attention to the very obvious error committed by most people suffering from the bite of a dog, whether proved to be rabid or not, after examining the wound, of directly replacing upon the part or parts bitten the very same garment or covering through which the may-be envenomed fangs have passed, thus supplying the very conditions necessary to the local absorption of most poisons—i.e., an abraded cuticular surface, and an opposed ‘virus;’ for it may be taken for granted that when the rabid dog’s tooth passes through clothing before reaching the flesh, more of the ‘virus’ of hydrophobia is in the covering than in the wound. I call public attention to this, for I believe the only measures of any use are directly after the bite. First, to remove the poison by local suction or by cupping-glass and excision; secondly, to improve general health, and thus predispose against any after ill effects.”

One additional precaution may be added. After a person has been bitten by a *suspected* dog, the animal should on no account be killed, for after all it may turn out that it was not really mad; and by shutting it up and allowing it to live, the non-malignant character of the affection may be ascertained, which would be a source of unspeakable comfort to the patient’s mind, who would thus be relieved of a most harassing fear, that might otherwise have tormented him for months or years.

7.—Headache (*Cephalalgia*).

This condition frequently exists as an incidental symptom of various acute and chronic diseases, such as common cold, dyspepsia, typhus, or deranged period, and can scarcely be isolated as an independent malady. Occasionally, however, it is such a predominant and almost exclusive symptom, from a more or less local affection, from some irritation of the cerebral nerves, as to justify a distinctive consideration.

There are several varieties of headache, three of which we will first briefly consider, and afterwards point out the general symptoms and treatment of this and other affections of the head. Other varieties are referred to in the table a little further on.

8.—Gastric Headache—Sick Headache.

This, often erroneously called “bilious headache,” is the headache of indigestion, and appropriately called *Sick-headache*. It may be only a temporary condition, from one or two dietetic transgressions; or a more permanent one, such as exists in persons constantly troubled with dyspepsia.

SYMPTOMS.—Nausea and sickness; stupefying or agonising headache, generally commencing in the morning, and often confined to one spot on the side of the head, on the forehead, or over the eye, and attended with giddiness, dizziness, or swimming in the head (*vertigo*), dimness of vision, or intolerance of light, etc.

CAUSES.—Errors of diet; indulgence in wine; sedentary habits; or it may occur in a weak stomach without any immediate dietetic infraction.

TREATMENT.—*Acon.*, *Ipec.*, *Puls.*, *Bry.*, *Bell.*, or *Nux V.* See “*Symptomatic indications*,” page 315, and the section on “*Indigestion*.”

ACCESSORY MEANS.—Abstinence from rich or too fat food, confectionery, coffee, and, generally, alcoholic beverages, are indispensable in the successful treatment of this affection.

9.—Congestive or Plethoric Headache.

SYMPTOMS.—This form is marked by determination of blood to the brain, the cerebral blood-vessels become greatly congested, with flushed face; giddiness, especially on stooping; throbbing pain in the head, increased by movement; a sense of pulsation in the ears, and beating of the arteries in the neck. An attack sometimes occurs with such suddenness and intensity that apoplexy appears inevitable. There are also distressing retching, chilliness, coldness of the extremities, especially the lower, the pulse being heavy, weak, slow, and intermittent.

CAUSES.—Living too freely; late hours; an inactive life. Menstrual derangements in females often occasion congestive headaches.

TREATMENT.—*Acon.*, *Bell.*, and *Glon.*, are the chief remedies; sometimes *Puls.* and *Ant. T.* For the symptoms requiring these remedies, see pages 315-17.

ACCESSORY MEANS.—Headache attended with symptoms of fulness, heat and heaviness, and also that arising from indigestion, requires simple and light diet; animal food should only be taken in small quantities, with a liberal admixture of vegetables; rich, fat food, *over repletion of the stomach*, and alcoholic beverages are particularly to be abstained from. Immoderate excitement, heated rooms, fits of passion, or severe exertion, may be followed by dangerous symptoms. Gentle and regular out-door exercise, occupations which do not require a stooping posture, or too great physical effort, and sponging over the whole surface of the body every morning on rising, are likely to exert a most salutary influence in congestive headaches.

10.—Nervous Headache (*Hemicrania*).

In consequence of this variety of headache being located in the nerves about the eyes, and recurring every day, every second day, or every fortnight or month, it is often called *bron-ague*.

SYMPTOMS.—A sudden and gradual attack of severe tearing or throbbing pains, of a neuralgic character, the painful part feeling sore, or even as if a nail were being driven into the brain; light or noise are almost intolerable, and the patient is hypocondriacal, hysterical, and low-spirited. An attack generally sets in early in the morning, and is often attended with retching and vomiting.

CAUSES.—Debility and exhaustion; mental or physical fatigue; any local affection of the body with which the brain sympathises. In the case of females, too prolonged nursing often causes it.

TREATMENT.—*Ign.*, *Nux.*, *Ars.*, *Bell.*, *Puls.*, *Cham.*, *Coff.*, *Acon.*, *Chin.*

ACCESSORY MEANS.—A nutritious, liberal, and digestible diet, except during an attack, when it should be light and sparing. Regular out-door exercise in a bracing atmosphere, and the avoidance of mental or bodily fatigue or excess, are essential.

11.—Tables of various kinds of Headache, and their Remedies.

1. *Headache with derangement of the stomach*:—*Ant. C.*, *Ipec.*, *Puls.*, *Nux.*, or *Sulph.*
2. *With catarrh*:—*Acon.*, *Ars.*, *Cham.*, *Dulc.*, *Merc.*, *Puls.*
3. *With constipation*:—*Bry.*, *Nux.*, *Opi.*
4. *With congestion of blood to the head*:—*Acon.*, *Bell.*, *Glon.*
5. *From intoxicating beverages*:—*Nux.*, *Opi.*

6. *From external injury*:—Arn., if feverish with Acon.
7. *From emotions*:—Opi. (*fright*), Coff. (*joy*), Ign. (*grief*), Cham. or Coloc. (*anger*), Verat. (*fear*), Acon. (*anxiety*).
8. *From atmospheric changes*:—Bry., Rhus., Carb. V.
9. *Mental labour, watching, etc.*:—Cocc., Nux., Chin.
10. *Rheumatic headache*:—Acon., Arn., Bry., Merc., Nit. Ac.
11. *Nervous headache*:—Bell., Bry., Cham., Coff., Ign., Nux, Puls., Sep.
12. *Hysterical headache*:—Acon., Cocc., Ign., Nit. Ac., Sep., Valer.
13. *Chronic headache*:—Calc. Carb., Sep., Silic., Sulph.

In the last-named variety of headache, remedies are most suitably administered in the intervals between the paroxysms; and if selected with judgment, at the same time that the general habits of the patient are directed in accordance with the laws of health, the headache may certainly be modified, if not cured.

SYMPTOMATIC INDICATIONS.—To render the selection of a remedy as easy as possible, the following indications are subjoined.

Belladonna.—This remedy is useful in more severe forms of headache, with fulness, pressure, and heaviness on the forehead above the eyes, aggravated by motion, noise, or light; congestion to the head, with redness of the face, glistening of the eyes, and excessive sensitiveness to external influences; the pains are shooting, tearing, or throbbing, darting from one point to another, and never fixed. A dose every one or two hours until relieved; afterwards, less frequently. This remedy is often useful after, or in alternation with, *Aconitum*.

Aconitum.—Heat in the head, from excitement, aggravated by motion and the erect posture, but relieved by cold water; throbbing in the arteries of the head, and full, bounding pulse; sickness, vomiting of bile; a sense of coldness, etc.

In rheumatic, bilious, and apoplectic headaches, the strong tincture of the root may sometimes be administered with good results.

Glonoine.—This remedy is valuable in *congestive headache*; dizziness, vertigo, throbbing in the temples, giddiness when walking in the open air, etc. Being very volatile it should be mixed as required. As a rule, 3x. is a good dilution.

Nux Vomica.—Headache from intoxicating drinks, sedentary habits, too close attention to study or business; headache with nausea or vomiting of sour and bitter substances; stupefying headache accompanied with giddiness and heaviness in the head, occurring early in the morning, as from intoxication, or when it comes on after meals, and is connected with other symptoms of indigestion. It is strongly indicated by a dark or bilious complexion, an irritable disposition, and a torpid action of the bowels. Headache caused by intoxicating beverages sometimes requires the strong tincture.

Opium.—Headache with *stupor*, heaviness, wandering expression, sluggish action of the bowels, and after a *fright*.

Ipecacuanha.—Headache, with distressing retching, either empty or of bile and mucus; nausea, vomiting of food, and an inability to retain anything in the stomach, especially after excessive eating, indigestion, exposure, etc. It should be given directly these symptoms are indicated, and repeated at intervals of thirty or forty minutes, till improvement ensues.

Pulsatilla.—Headache after eating rich food or fruits, or with acidity of the stomach, heaviness of the head, pain on one side of the head, shooting into the ears, paleness of the face, fretfulness, and shiverings. Also, when it occurs in females from suppression or derangement of the menses, in consequence of a cold, exposure to wet, etc.

Chamomilla.—Headache from the sudden suppression of

perspiration caused by a draught; tearing pain on one side of the head; frequent changes in the colour of the face; redness and burning, often confined to one cheek, with coldness and paleness of the other.

China.—Headache from loss of the fluids of the body, as after hæmorrhage, diarrhœa, etc.

Bryonia.—Headache occasioned by cold, most troublesome in the morning, or after a meal; the pain is of a digging, tearing character, with a feeling as if the contents of the head would protrude through the forehead on stooping. It is also indicated in *rheumatic headache*; also when it is accompanied with bleeding from the nose, chilliness, burning and watery eyes, or constipation.

Coffea.—Nervous headache; pain as from a nail being forced into one side of the brain; great sensitiveness to noise, etc.; especially suitable for nervous females and children.

Aurum.—Rush of blood to the head when stooping; roaring noise as of rushing water; hemicrania with severe throbbing pains; excessive pain in the *bones* of the skull. This remedy is chiefly required in constitutions tainted with syphilis, or injured by large doses of *Mercury*, with a hypochondriacal, melancholy disposition.

Ignatia.—Pressure on the brain, the pain extending to the root of the nose; headache from grief or other depressing emotions; also for nervous or hysterical patients.

Arsen., *Iod.*, *Merc.*, *Phos.*, *Plat.*, *Rhus*, *Sulph.*, and *Verat.*, are also remedies required in various forms of headache.

PREVENTIVE TREATMENT.—An attack of headache may often be warded off, if immediately the first symptoms are noticed, a dose of *Nux Vomica*, if from dyspepsia—or of *Aconitum*, if from a cold—is taken.

GENERAL ACCESSORY MEANS.—Regularity of meal-time; proper adaptation of clothing to the requirements of our

changeable climate; due regularity in the action of the bowels; and a sufficient amount of exercise taken every day, are most essential aids in the cure of the affection. Another point, referred to in the following paragraphs, must on no account be overlooked, viz., sufficient *recreation*, the want of which is a fruitful cause of headache.

RECREATION.—In a previous publication we pointed out the fact, from statistical returns of the Registrar-General of the births, marriages, and deaths of England and Wales, that diseases of the head—congestion of the brain, apoplexy, paralysis, epilepsy, etc.—have rapidly multiplied of late years, being as three to one when compared with earlier, more simple, and less competitive times. This augmented brain affection is no doubt the result of the overtasked energies, the long and unrelieved hours of physical or mental toil, and the feverish excitement in which great numbers live, together with the large amount of stimuli taken to sustain that excitement.

Hence it is our honest conviction that if the suggestions contained in this manual be faithfully observed, they will lead to the moulding afresh of our commercial and social habits. Daily exercise and recreation in the open air, true temperance, a less selfish and anxious pursuit of wealth, and a knowledge of the chief causes of disease, would materially reduce the present superfluous wear and tear of body and mind, and conduce to a more healthy, because a more natural, mode of life. The more complete application of the early closing and weekly half-holiday movements to all departments of business and professions, benefitting alike the employer and the employed, would also greatly contribute to the diminution of diseases of the head.

“Having regard to the health as well as the happiness of the industrious classes, we strongly urge all employers to pay wages on Friday, and to *give the weekly half-holiday* on Saturday; our plea being strengthened

by the experience of years, that work is better done when it is not excessive or unrelieved by recreation. Rest and outdoor amusements are to the human frame what oil is to the wheels of the iron machine. To the whole community, then, we commend the rule, NEVER SHOP AFTER TWELVE ON SATURDAY, and thus help to secure for the city clerk, the busy shopman, and the toiling artisan, relief from his duties at noon on Saturday, to enjoy amidst the scenes of nature, or in the bosom of his family, the unbending of his back, and the unwrinkling of his brow, and ensuring, from lighter hearts and invigorated bodies, greater diligence and better work" (*The Stepping-Stone to Homœopathy and Health*).

12.—Apoplexy.

DEFINITION.—Apoplexy is a state of *coma*, coming on more or less suddenly, from pressure upon the brain, from causes originating within the cranium.

VARIETIES.—Pathologically, there are three varieties of apoplexy. 1. *The Hæmorrhagic*. This, the most frequent variety, consists in the rupture of a vessel, and extravasation of blood in the substance of the brain. The attack is usually sudden and rapid in its development. 2. *Congestive* apoplexy, which is an overloaded condition of the vessels of the brain. 3. *Serous*, an effusion of serum into the ventricles and arachnoid cavity, and probably a sequel of the congestive form. Some name a fourth variety—*Simple* apoplexy. This may be either a functional disorder of the brain, from causes operating elsewhere, or it may be consequent on uræmic poisoning. In this variety *post-mortem* examination is unable to detect any morbid change.

WARNINGS.—Happily, apoplexy is generally indicated by well-marked premonitions, which deserve serious attention, for then remedial measures may often avert what at an advanced stage they will be utterly powerless to control. The warnings are chiefly—Giddiness, particularly on stooping; fulness and pulsation of the blood-vessels of the head; sleepiness with heavy or snoring breathing; transient blind-

ness, deafness, or noises in the ears; momentary loss of consciousness, with or without indistinctness of speech or incoherent talking; flashes, motes, etc., before the eyes; numbness or tingling in the hands or feet; unsteady gait; partial paralysis, sometimes involving the muscles of the face, sometimes those of a limb.

The above symptoms indicate a morbid state of the circulation in the head, and it is proper to observe that one or several of them may occur as the result of indigestion. Far greater importance, however, should be attached to them if associated with the following—

APOPLECTIC PREDISPOSITIONS.—(1) Persons of a *stout, plethoric habit* of body, with a short thick neck, florid face, protuberant belly, and above fifty years of age. After fifty years of age, apoplexy is one of the most frequent causes of death. (2) Those whose *predecessors* have been afflicted with apoplexy. (3) Certain *habits* of life, such as intemperance, excessive eating, uncontrolled passion, pressure about the neck, and too close mental labour, or any habit favouring congestion to the head. (4) *Disease* affecting the heart, kidneys, or blood-vessels of the brain; also the too sudden suppression of an accustomed discharge, as suppressed hæmorrhoids, or the menses.

MODES OF ATTACK.—Apoplexy may come on *suddenly* or *gradually*. The patient may be suddenly struck with insensibility, falling, at once bereft of motion and consciousness. Such a case is termed *primary apoplexy*. More frequently, however, he is first seized with either pain in the head, or with giddiness and sickness, or with partial paralysis, as of one side of the face, or one arm, and then being carried to bed gradually becomes comatose; or sometimes drowsiness gradually increases to perfect *coma*. This is called *ingravescent* apoplexy, because the symptoms become *gradually* worse, and is far more serious than a primary case,

because we have evidence that the cause of the symptoms are still in operation, and because such cases are always hæmorrhagic, and the brain has undergone organic and permanent changes. On the other hand, a primary case may be of a congestive, serous, or simple variety, and the condition may pass off without any permanently injurious result.

SYMPTOMS.—In the early stage of an ingravescent case, before the patient becomes comatose, there is great depression in the circulation from the shock to the nervous system; the surface is cold, pale and clammy, and the pulse frequent, small and weak. As coma comes on, the pulse becomes full, slow and laboured (passes slowly under the fingers); the surface warm, sometimes preternaturally so, and perspiring; the countenance has a peculiar bloated appearance, and is often congested; the pupils are insensible to light, and usually dilated, although one or both may be contracted; the breathing is stertorous from paralysis of the soft palate, which, hanging loose, cuts the current of the air in its passage to the lungs; the urine is retained from inaction of the bladder, and the bowels are sluggish.

DIAGNOSIS.—*Apoplexy and Epilepsy.*—The latter begins with a piercing scream, is always attended by convulsions, and much frothing at the mouth, symptoms which do not occur in apoplexy. From *intoxication* or *poison with opium*,* the history and circumstances of the patient must be considered; as whether he is likely to have been drinking, the presence or absence of the odour of spirits in the breath, or whether he has been low-spirited or in any difficulties likely to have led him to swallow poison. It is from such circumstances that we must make our diagnosis, as the condition of the brain, especially in the advanced stages, is the same

* For a tabular statement of the chief differences between apoplexy and poisoning by opium, see the chapter on "Toxicology," section "Opium," in the larger edition of this work.

in all these cases. The importance of promptly recognising apoplexy from alcoholic or narcotic poisons arises from the difference in the immediate measures that would be taken in the one or the other case. An emetic, or the stomach pump, might remove in the one case what, if suffered to remain, might lead to serious or even fatal results; while in the other case an entirely different procedure would be necessary.

TREATMENT.—This disease assumes such numerous forms, and is of so dangerous a character, that none but a medical man can safely conduct the treatment. As, however, a fit may occur suddenly, when no medical man can be immediately procured, the following directions should be promptly acted upon.

TREATMENT DURING A FIT.—1. If possible, convey the patient immediately to a large apartment where the cold air can freely circulate around him. 2. Loosen the neckerchief, stays (in the case of females), and bandages of every kind, and place the patient in a warm bed, with his head moderately raised. 3. Apply warmth to the extremities and axillæ (armpits), and a cold wet towel, or pounded ice in a bladder, to the head; also a sinapism to the epigastrium. 4. At the same time, if the circumstances of the case admit of the administration of medicine, one of the annexed may be given:—

Arnica.—If long-continued or severe bodily exertion, or any external violence has been the exciting cause.

Belladonna.—Red, swollen face, throbbing of the blood-vessels, convulsive movements of the face or limbs, dilatation of the pupils, loss of speech, suppression or involuntary discharge of urine, etc.

Opium.—Drowsiness, heaviness, and stupor previous to the attack, profound coma, irregular and snoring breathing; red, bloated face, stupid and besotted expression, eyes half open, pupils dilated and insensible to light, coldness of the extremities, etc.

Aconitum.—Full, rapid and strong pulse, dry hot skin, and other prominent febrile symptoms.

ADMINISTRATION.—During a paroxysm, one or two drops of the tincture placed on the tongue in a teaspoonful of water, or on a small piece of sugar, every fifteen or thirty minutes; in *threatened* apoplexy, a dose every hour; as the symptoms are subsiding, every three to six hours.

AFTER A FIT.—Should the patient recover from the fit, great and unremitting care must be observed to prevent another attack. The diet should be light, but nourishing; milk, light puddings, boiled vegetables, and fish, are extremely valuable; a full animal diet should not be allowed, and, as a rule, stimulants should be avoided, except a moderate quantity of the light Hungarian or French wines. The causes of the disease should, as far as possible, be avoided or modified. Further, the administration of one or more of the following remedies, if indicated, is recommended:—*Nux. V.*, *Acon.*, *Bell.*, *Phos.*, *Rhus.*, or *Opi.*

PREVENTIVE MEASURES.—Undeviating temperance in eating and drinking. Physical and mental exertion; fits of passion or excitement; sudden changes of temperature, over-heated rooms, warm baths, wet feet, etc., must be uniformly avoided.

13.—Paralysis—Paralytic Stroke (*Hemiplegia, etc.*).

Hæmorrhage occurring within the cranium does not always produce apoplexy, but sometimes hemiplegia.

HEMIPLEGIA is that form of paralysis in which one lateral half of the body is affected from disease of the opposite half of the brain, the parts generally involved being the upper and lower extremities, the muscles of mastication, and the muscles of one side of the tongue, and the patient is said to have had a “paralytic stroke.” The pathology, causes, and treatment, are the same as pointed out under apoplexy.

Hemiplegia may be very partial, as when it affects the 3rd nerve only, causing dropping of the upper eyelid, to which that nerve sends branches, so that it cannot be raised except by the hand. This condition is termed *ptosis*. The eye is also sometimes turned outwards or inwards from a similar affection. This condition must be distinguished from facial palsy, or paralysis of the *portio dura nerve* from cold upon one side of the face, and quite independent of disease of the brain.

PARIPLEGIA is a form of paralysis, more or less complete, of the *lower half* of the body, in which the legs, and perhaps also the muscles of the rectum and bladder are implicated. It is caused by disease of the spinal marrow, or of its membranes or vertebræ, in which the marrow is either pressed upon or disorganized. It may also arise as one of the symptoms of chronic cerebral disease.

MYELITIS, or inflammation of the spinal marrow, is generally *caused* by blows or accidents, but sometimes from constitutional causes. It generally ends in softening. It may be distinguished from lumbago or hip disease by the absence of pain, but chiefly by a paralytic condition of the parts below the seat of inflammation.

TREATMENT OF PARALYSIS.—This must be guided by the cause of the disease, and the accompanying symptoms. The chief remedies are—*Arn.*, *Rhus Tox.*, *Nux V.*, *Bry.*, *Bell.*, *Hyos.*, *Cocc.*, and *Sulph.*

ACCESSORY MEANS.—1. *Electricity, or galvanism*, judiciously employed, after the acute inflammatory symptoms have subsided, is an agent of great value. 2. The cold *douche*, bathing with salt water, or, if the patient is capable of the effort, sea-bathing tend to promote the nutrition of the spinal marrow. 3. *Regulated exercise*—active when the patient is capable of it, passive when he is not, is of great utility in overcoming muscular rigidity, and restoring the functions of paralysed limbs. 4. Well-directed frictions.

CHAPTER IX.

DISEASES OF THE EYE.

OPHTHALMIA is a general term for inflammation of the conjunctiva, or mucous membrane which lines the eyelids and the front part of the eyeball. Formerly, when the eye and its diseases were less understood than they are at present, nearly all inflammatory affections of the organ were included in this term. There are several varieties of ophthalmia, the most frequent being the following.

1.—Catarrhal Ophthalmia.

SYMPTOMS.—A pricking pain, especially on moving the eye, comparable to sand or a little fly between the lids; sensitiveness of the membrane to cold air; watering of the eyes, and a secretion of mucus, gluing the lids together on rising in the morning; bright redness of the conjunctiva, owing to its superficial vessels being enlarged and tortuous. The most marked symptoms are—*scarlet redness*, an *increased discharge*, and a *pricking pain*. This last symptom so closely resembles a grain of sand, that the patient can scarcely be persuaded that there is no foreign substance in the eye; and this is no doubt due to the irregular distension of the vessels, which disturb the part mechanically, just as dust or a fly might irritate it.

CAUSES.—Vicissitudes of temperature, easterly and north-easterly winds, cold and damp, and especially draughts of cold air.

TREATMENT.—*Acon.*, *Bell.*, *Mercurius*. For the symptoms requiring these remedies, see under “Medicines for different forms of Ophthalmia,” pages 329–31.

ACCESSORY MEANS.—The patient should avoid exposure to currents of air, cold and damp, and if the weather is inclement during an attack, he should remain in a room of uniform temperature. Persons predisposed to ophthalmia should guard against all needless exposures during the prevalence of *easterly* and *north-easterly* rough winds. A piece of lint, wetted in tepid or cold water, as may be most agreeable to the patient, should be laid over the eye. When the eyes are agglutinated in the morning, they should on no account be opened without being first well moistened with saliva or tepid water; but any gumming together may be entirely prevented by smearing the lids at night with a little cold cream or olive oil. The food should be simple, nourishing, and digestible; the habits regular and early; and bathing practised as directed in the article on that subject, pages 29–32.

2.—Strumous Ophthalmia.

This variety occurs in children, and in young persons advancing towards puberty, of scrofulous habits, and living chiefly in low, damp, and badly-drained situations.

SYMPTOMS.—The three prominent symptoms are—*Extreme intolerance of light*, so that the child obstinately holds its head down; and only with the greatest difficulty can open its eyes. *Spasmodic contraction of the muscles*, the lids being everted by the spasmodic action. *Profuse flowing of tears*, so that the skin of the cheeks is often excoriated or covered with an itching eruption. And when, at length, the eyes are opened, there is little or nothing to be seen at all commensurate with that dread of light which the patient manifests, for it is more a nervous than a vascular disease. These symptoms are generally accompanied by others which mark the scrofulous constitution—enlargement of the *absorbent* glands about the neck, sore ears, a large and hard

belly, grinding of the teeth, general debility, and other signs of struma.

CAUSES.—As above stated, the predisposing cause is a strumous habit; the exciting causes are, undue exposure to cold, bright light, irritating vapours, want of cleanliness, etc.

TREATMENT.—*Merc. Cor.*, *Calc. C.*, *Phos.*, *Hep. Sulph.*, *Acon.*, *Bell.*, *China*, etc. For the indications, see page 329.

ACCESSORY MEANS.—As a lotion, cold or tepid water should frequently be applied during the acute stage, or tepid milk and water will often be found very soothing. When the chronic form sets in, an occasional stimulating *collyria*; but as this application cannot be made with safety except by a medical man, we make no further reference to it. See also “Catarrhal Ophthalmia,” p. 325–26.

DIET, etc.—Plain, nourishing food, cod-liver oil, and pure country air.

3.—Ophthalmia in Infants (*Ophthalmia neonatorum*).

This generally occurs within three days from birth, but occasionally not for two or three weeks, and is undoubtedly caused during birth from contact, in the vaginal passage, of leucorrhœal or gonorrhœal discharge with the eyes of the child. Possibly irritation of the eyes from neglect of cleanliness, or exposure of the eyes to a bright light or a strong fire, may be a cause in other cases.

SYMPTOMS.—A profuse discharge of thick yellow pus, which collects between the eyelids and the globe; this being removed, the conjunctiva is seen swollen, and so vascular as to resemble crimson velvet; the cornea looks smaller than natural, and as if sunk in the bottom of a pit. The infant is very restless and feverish.

TREATMENT.—*Mercurius* should be administered thrice daily for one or two weeks. If necessary, it may be preceded

by two or three doses of *Acon.*, and followed by the administration of *Sulphur*; a dose night and morning for a week.

ACCESSORY MEANS.—These are of the first importance, and consist chiefly in the observance of great cleanliness, the eyes being sponged or syringed out very many times in the day. The *preventive* measures must have for their object the improvement of the mother's health prior to parturition, including the arrest of the local symptoms which are so frequently a cause of the disease in the infant.

4.—Purulent Ophthalmia.

This is a more violent and destructive form of ophthalmia than either *catarrhal* or *strumous*. The tingling sensations first experienced are soon followed by acute pains, which extend through the eyes to the temples and brain itself; the flow of tears is changed into a profuse secretion of pus, the lids are swollen, and there is almost total loss of vision. There are also constitutional symptoms, such as headache, nausea, quick pulse, hot skin, etc.

VARIETIES.—There are three forms of purulent ophthalmia—*purulent ophthalmia* of adults, or *Egyptian ophthalmia*; *gonorrhœal ophthalmia*; and *purulent ophthalmia* of *newly-born children*. The last-named has already been described.

Egyptian or *contagious ophthalmia*, arises when people are crowded together in filthy habitations, and was first brought into this country from Egypt by our troops, early in the present century; hence its name.

CAUSES.—Sudden alternations from heat to cold, the irritation of sand in the eyes; *metastasis* of measles, scarlatina, smallpox, etc.; also endemic and epidemic influences.

5.—Gonorrhœal Ophthalmia.

This arises from direct contact of gonorrhœal matter, and not, as some suppose, a metastasis of the disease from the organs of generation to the eyes. It presents similar symptoms to the Egyptian variety, differing only in their greater intensity.

In both forms there is great danger that the conjunctiva should swell extremely and overlap the margin of the cornea, and lead to its sloughing, apparently by strangulation of the vessels by which it is nourished. When this condition occurs, it is called *Chemosis*.

TREATMENT.—*Acon.*, *Bell.*, *Hepar Sulph.*, *Merc.*, *Sulph.*

ACCESSORY MEANS.—Assiduous bathing, fomentations, etc.; astringent *collyria*, and, sometimes, surgical measures.

6.—Medicines suited to the different forms of Ophthalmia.

Belladonna.—Pain, redness, and swelling: throbbing pains in the temples; flushed cheeks, glistening eye, and great intolerance of light. Half a dozen drops of the tincture may be mixed with as many table-spoonfuls of water, and a spoonful given during the acute stage every hour, and afterwards every three or six hours. This medicine is often required in alternation with *Aconitum* if there are much heat and dryness of the skin, thirst, etc.; or one or two doses of *Acon.* may precede *Bell.*

Mercurius Cor.—In the most violent forms of acute ophthalmia with *Chemosis*, the 1st or 2nd dilution of this remedy will often cut the attack short.

Mercurius Sol.—Ophthalmia marked at first by a copious discharge of watery fluid, which afterwards changes to mucus and pus; agglutination of the lids in the morning; smarting heat and pressure, with aggravation of the pains

when moving or touching the eyes. There is not much fever present, but considerable itching and irritation.

Arnica.—All inflammations affecting either the mucous membrane, or the deeper structures of the eye, from *mechanical injuries*. The eye should be bathed with a lotion made by adding twenty drops of *Arnica* ϕ to four table-spoonfuls of water. After being well bathed, a piece of lint or linen should be saturated with the lotion, and applied to the eye, then covered with oiled-silk, and secured by a handkerchief. The cure will be much accelerated if the external use of this remedy is accompanied by its internal administration, giving two pilules, or one drop of the attenuated tincture, every three or four hours.

Aconitum.—Ophthalmia with constitutional symptoms—quick pulse, dry skin, and thirst.

Arsenicum.—Obstinate ophthalmia, from cold, rheumatism, or gout, in weak and nervous patients, particularly if the secretion is of an acrid, corroding character, with burning, tearing, or stinging pains in the globe and lids, aggravated by exposure to light.

Nit. Acid.—Purulent ophthalmia; swelling and redness of the mucous membrane and lids; secretion of viscid mucus or pus; burning and smarting in the eyes; photophobia; nightly agglutination, and pains in the bones and parts around the eyes. *Nit. Acid* is indicated in cases originating in syphilis, or aggravated by mercurial preparations.

Hepar Sulph.—This is an excellent remedy in similar cases, and may follow or be alternated with *Nit. Acid*.

Phosphorus.—Chronic and obstinate cases of ophthalmia which have resisted the usual remedies. There are sensitiveness to light, heat and itching of the eyes, sudden attacks of blindness, black spots floating before the eyes, and secretion of viscid mucus.

Graphites.—Scrofulous ophthalmia, with extreme intolerance of light, especially when, in addition to the affection of the eyes, the patient presents the usual signs of a strumous constitution.

Calcareo Carbonica.—Valuable in the treatment of various forms of chronic ophthalmia, especially when occurring in debilitated, scrofulous children. We can fully endorse, from extensive use of this remedy, the following remarks of a homœopathic physician:—" *Calcareo* is one of our most important ophthalmic medicines, and is surpassed by none in its applicability to the generality of cases of scrofulous inflammation, whether of the eye itself or its lids; and is indispensable where there is marked scrofulous diathesis, indicated by swelling of the glands," etc.

Other remedies may be required,—*Sulph.*, *Sil.*, *Puls.*, *Lyc.*, *Aur.*, *Euph.*, *Rhus Tox.*, *Spig.*, etc.

SUMMARY OF LEADING REMEDIES FOR OPHTHALMIA, ETC.

Ophthalmia from cold.—*Acon.*, *Bell.*, *Merc.*, *Dulc.*, or *Puls.*

Following measles.—*Puls.*, or *Carbo Veg.*

Following scarlatina.—*Bell.*, or *Hep. Sulph.*

Following smallpox.—*Merc.*, or *Sulph.*

From suppressed cutaneous eruption.—*Sulph.*

From debilitating causes.—*Chin.*, *Phos.*, *Nux.*, *Sulph.*

In scrofulous persons.—*Calc.*, *Hep. Sulph.*, *Graph.*, *Merc.*, *Iod.*, *Bell.*, or *Acon.*

In gonorrhœal or syphilitic patients.—*Acon.*, *Merc.*, *Nit. Ac.*, *Aur.*, *Cann.*, *Thuja*, or *Sulph.*

From abuse of alcohol.—*Nux Vom.*, or *Opi.*

Watery eyes.—*Petro.*, *Euph.*, *Bell.*, *Spig.*, or *Phos.*

Paralysis of the eyelids.—*Bell.*, *Zinc.*, or *Verat.*

Blar eyes.—*Euph.*, *Puls.*, *Merc.*, or *Rhus Tox.*

ACCESSORY MEASURES.—In the treatment of the various forms of ophthalmia, and weak and imperfect vision gener-

ally, the causes of the disease should, if possible, be correctly ascertained, so that they may be, as far as possible, obviated and guarded against. Patients in crowded and unhealthy towns should remove to the country, at least for a time, where they may take daily out-door exercise, and enjoy a pure and bracing air. The food should be plain and nourishing, avoiding coffee and fermented drinks; the habits early and regular, and frequent bathing should be practised. A small *wet compress*, covered with oiled-silk or india rubber, worn over the nape of the neck, is a valuable counter-irritant, when the more violent inflammatory symptoms have been subdued. See also "Accessory Measures," previously pointed out, especially under "Catarrhal Ophthalmia."

7.—Cataract.

DEFINITION.—Cataract is an opacity in the crystalline lens, or its capsule, or both, causing obscuration, or total loss of vision.

VARIETIES.—In the schools, several are described, such as *hard* cataract, of a brownish colour and almost peculiar to old people; *soft* cataract, the lens being of a white glossy appearance, having a wider circle; *fluid* cataract, which may be recognised by being seen to move with different positions of the head. The last two forms occur chiefly in young people, but the hard is the most frequent, for it is one of the changes incident to old age.

SYMPTOMS.—The opacity comes on in a gradual manner, first affecting one eye, but afterwards both, and is often discovered by accident only. The lens becomes of an amber colour and somewhat less, and the central part first becomes opaque. Objects appear to the patient as if seen through a mist, and a flame is observed surrounded by a halo. Vision is less affected in a weak light, such as twilight, or when *the patient* has his back to the window; for, under such

circumstances, the pupil dilates widely, and the light enters at the circumference of the lens, which is less opaque than the centre. The patient also sees better in an oblique than in a straight direction, because the lens, being shrunk, does not completely cover the vitreous humour. From the gradual way in which the disease comes on, the patient has a natural, easy manner, and very different from the fixed, vacant stare which marks complete *amaurosis*. Indeed, the patient never becomes so blind but that he can distinguish day from night, the position of the window, and the shadow of passing objects, and find his way about his own house with little difficulty.

CAUSES.—Exposure of the eyes to irritating vapours; mechanical injuries; congestion of blood to the eyes from exercise in the hot sun, or before hot and bright fires; chemical and mechanical irritants; long-continued use of the eyes in looking at too minute objects; hereditary predisposition.

TREATMENT.—On the treatment of cataract, Dr. Malan makes the following sensible remarks:—

“No medicine or internal treatment has, as yet, been of any avail in confirmed and ripe cataracts; this was left for better days in medical science, and Homœopathy has given us means of cure which were totally unknown before. I do not mean to say, be it well understood, that Homœopathy will entirely supersede surgery, and that we are not to trust this latter means, or even employ it—no; but I wish to draw attention to these three remarks only, that—(1) in many cases Homœopathy will cure, completely cure, real cataracts, even old and ripe ones; (2) in many more it will prevent the progress of the cataract on the other eye, when as yet only one is affected; and (3) that if it does not always succeed in curing, it will always prepare the whole constitution for the surgical operation, prevent inflammatory accidents after it, and secure its success.

“This part of medical treatment has been to this day too much neglected, because, to our eyes, this more or less exorganic body seemed not fit for medical treatment; and because we have been accustomed to hear

that surgical operation only is of any use, we have left aside the internal treatment, which will often be crowned with far more success than is generally expected. Not the least process in the human body, morbid or natural, can take place without the whole constitution taking some part in it. We cannot expect that an organ of the body, be it ever so small, can become affected quite independently of the organism, but rather that it becomes affected in consequence of a morbid process existing, though not seen, in the organism itself. I am as far from admitting such confined notions as I would be to admit that the very same organ has no common tie with the rest of the body, and is not one constituent part of it, by its nerves, its vessels, and all its textures.

“If, therefore, one part of the body is diseased, we must not direct our treatment to it solely, and use what is called a local treatment alone. We must act on the whole constitution in the same way as we would direct our attention to the whole tree when it bears decayed fruit.”

Even in cases which require the surgical operation of *couching* or *extraction*, this should be deferred so long as the patient has useful vision with one eye, lest an operation should produce inflammation, which might extend to the other, and thus both be lost.

The most important remedies for this disease are—*Cann.*, *Sulph.*, *Caust.*, *Sil.*, *Phos.*, *Calc.*, *Euph.*, and *Con.*; but the selection must be determined by the cause of the disease, and the most characteristic symptoms present.

8.—Iritis.

The iris is a movable curtain, having a circular aperture nearly in its centre, and occupies the space between the *cornea* and *crystalline lens*. Its use is to regulate the amount of light which shall be admitted into the eyes; for this purpose its inner circumference is capable of dilating and contracting, in obedience to certain influences, whilst its outer circumference is immovably fixed. Iritis is an acute inflammation of the iris, and may be of several forms, namely, *traumatic*, *syphilitic*, *rheumatic*, or *scrofulous*.

TRAUMATIC IRITIS generally occurs in artisans, such as

engineers, blacksmiths, etc., from injury, as a stab, cut, or blow. It has been called *common iritis*, because it is a cause of *common inflammation*, without any specific or constitutional taint.

SYMPTOMS.—Deeply-seated orbital pains, which extend to the temples and even to the back of the head; great impairment of vision; a radiating zone of vascular redness surrounding the cornea, etc.

TREATMENT.—*Arn.* (both internally and externally), *Acon.*, *Bell.*, *Sulph.*

SYPHILITIC IRITIS generally occurs about the middle period of secondary syphilis, after the patient has suffered from sore throat, etc., but before the periosteum and bones become affected. It chiefly differs from the traumatic variety in the comparative absence of pain, except during the night, and in its being a more subacute or chronic disease.

TREATMENT.—*Mercurius Sol.*, *Iodide of Mercury*, *Nit. Acid*, *Sulph.*

RHEUMATIC IRITIS arises from cold or is the consequence of rheumatism; it is very painful, because the *sclerotic*, which is an unyielding membrane, is so much implicated. Unless skilfully treated, it has a great tendency to recur at intervals, so that a person may have an attack once or twice a year during the remainder of his life.

TREATMENT.—*Bell.*, *Aurum*, *Nux Vom.*, etc.

ACCESSORY MEANS.—Fomentations and poultices, astringent *collyria*, and, perhaps, other surgical measures.

9.—**Amaurosis** (*Gutta serena*).

DEFINITION.—Amaurosis is imperfection of vision from loss of nervous power consequent on some change in the retina, optic nerve, or brain.

The word is derived from the Greek, and means obscure or dark; for it may be of various degrees, from the slightest

defect of vision to complete blindness. In *partial amaurosis*, the patient sees as through gauze, or sees only part of the object, or sees doubly, or only sees when the eye is in a certain position in respect to the object. The patient finds himself incapable of estimating distances, so that he misses his aim when attempting to snuff a candle or pour water into a glass. In *complete amaurosis* the patient cannot distinguish day from night.

“The transparent parts of the eye, the several media, so skilfully and exquisitely adjusted for the due refraction and collection of the rays of light into an image of the object from which they flow, may all be perfect and in order; but the beautiful apparatus is useless—the patient cannot see with it. The fault is in the *nervous* matter, that should receive and transmit the impression, and render it an object of perception to the mind. And persons in this condition are said to have *amaurosis*.”

SYMPTOMS.—The symptoms of approaching amaurosis are—pain in the forehead and temples, diminishing as the disease advances, and ceasing when it becomes complete. The patient sees best in a bright light, and objects usually appear perverted, being only partially seen, or of an unnatural colour, or double, or dark bands cross the field of vision, or floating dark spots (*muscæ volitantes*), or flashes of light. The pupil is dilated, and if there is complete loss of vision, it will be fixed and insensible to light, but it will be beautifully black and clear; hence the disease has been called *Gutta serena*.

Amaurosis is not peculiar to any age, but occurs at almost any period of life, and may come on either rapidly or gradually, but generally rapidly.

VARIETIES.—Amaurotic cases are divisible into two classes—*organic* and *functional*. This is a very important division, because a functional case may be cured, if its cause is ascer-

tained and appropriate treatment adopted; on the other hand, the organic is generally incurable, and the patient is liable to die of disease of the brain. The diagnosis is now greatly assisted by the use of the *ophthalmoscope*.

THE OPHTHALMOSCOPE.—This instrument, invaluable as an aid to the diagnosis and treatment of obscure forms of disease leading to blindness, may here be briefly explained. It is a concave circular metallic mirror, which reflects a bright light into the pupil of the eye, from an oil lamp, or an argand burner that slides on a vertical rod; the mirror has a small hole pierced in the centre, through which the surgeon looks. A magnifying lens is placed between the mirror and the eye to be examined, at such a distance, and so adjusted, as to make the focus of the lens coincide with the pupil of the eye. The rays of light reflected from the polished mirror *illuminate*, and the lens *magnify*, the very recesses of the ocular globe. Thus the surgeon is enabled to extend his observations through the inner chambers of the living eye, not only to unfold its wonders and its beauties, but aiding him, leisurely and accurately, and quite painlessly to the patient, to determine the precise local condition of those parts of the eye, in which vision resides, and through which it is regulated. The ophthalmoscope is most valuable in diagnosing all cases of impaired vision, estimating with great fidelity the nature of the changes that may be taking place, whether they are functional or organic, stationary or progressive. The instrument is pre-eminently useful in diagnosing the changes attending those *early stages* of diseases, which, without the interposition of remedial measures, inevitably lead to blindness. The use of the ophthalmoscope is only contra-indicated when extreme intolerance of light exists.

CAUSES.—*Organic* amaurosis arises from some disease of the retina, optic nerve, or brain, or of some neighbouring

structure interfering with those parts. *Functional amaurosis* arises from various causes :—excessive use of the eyes on too bright or too minute objects ; constitutional derangement or debility, such as anæmia from prolonged nursing, excessive sexual indulgences, etc. ; abuse of stimulants ; too much sleep, or other circumstances which produce determination of blood to the head, and over-stimulate and exhaust the retina, but does not primarily damage the structure of the nervous apparatus of the eye.

TREATMENT.—*Belladonna*.—This is an excellent remedy in threatened amaurosis, with headache, bright flashes before the eyes, and a sensation of weight and pressure in those organs. It is particularly suited to stout, plethoric persons ; also if the disease has been caused by inflammation or congestion of the optic nerve, retina, or some part of the brain.

Nux Vomica.—Intermittent obscuration of vision ; stupefying headache ; or temporary loss of sight which occasionally accompanies intermittent diseases. This remedy is further indicated in amaurotic complaints traceable to too close confinement within doors, excessive mental labour, or to indulgence in stimulants.

China.—Indistinct vision, sudden obscuration of sight, great general debility, and in all cases in which the disease is due to profuse discharges of blood or pus, prolonged nursing, or tedious diseases.

Phosphorus.—The pupils and eyes are of a natural appearance, and distant objects are seen as if enveloped in mist ; black spots appear before the eyes, and there is diminished vision. It is especially indicated if loss of animal fluids, or self-abuse have led to the disease ; also when it occurs in enfeebled or aged persons.

Arnica.—Amaurosis from an external injury, such as a stun from a blow or a fall.

Other remedies are often required, especially—*Aur.*, *Euph.*, *Cann.*, *Hyos.*, *Stram.*, *Sulph.*, etc.

Dose and Administration.—See page 49.

ACCESSORY MEANS.—By referring to the paragraph under *Causes*, it will be obvious how necessary it is that there should be a strict avoidance of all habits likely to have produced the malady. If there is evidence that the blindness is connected with exhaustion or debility, nourishing diet, pure air, and frequent ablutions, are necessary. If, on the other hand, the patient is plethoric, or if the blindness follow a stroke of apoplexy, a vegetable diet, with little animal food, should be adopted, and alcoholic beverages withheld.

10.—Granular Lids (*Ophthalmia tarsi*).

DEFINITION.—*Ophthalmia tarsi* is a chronic inflammation of that portion of the conjunctiva which lines the eyelids, with disordered secretion of the Meibomian glands; the conjunctiva becomes thickened and its villi enlarged, giving rise to constant irritation, similar to that produced by foreign bodies. It is often called *granular ophthalmia*.

SYMPTOMS.—The granulations are rough and uneven, and may sometimes be detected by the touch; there is an abundance of pus secreted, so that the eyelids stick together, and become encrusted with dried mucus during sleep, which weakens and irritates the eyes, keeping up a constant inflammation. It is chiefly confined to the upper lids, but sometimes extends to the lower.

CAUSES.—A strumous constitution, or debility arising from disorders of the digestive and other organs. It occurs chiefly in the young, and is popularly called *blear eyes*, but is much less seen now than formerly.

TREATMENT.—This must be both local and constitutional. The chief internal remedies are—*Calc. Carb.*, *Hep. Sulph.*, *Graph.*, *Nit. Ac.*, and *Sulph.*

11.—Inversion of the Lids (*Entropion*).

This condition consists in an unnatural growing inwards of the eyelashes, so as to occasion great disfigurement, and constant irritation of the globe of the eye, and often leads to chronic ophthalmia. It generally occurs amongst the lowest ranks of society, especially the *Irish*, and often requires for its removal a surgical operation.

12.—Eversion of the Eyelids (*Ectropion*).

This is an eversion of the lower eyelid, resulting from burns on the face, or from thickening of the conjunctiva from tarsal ophthalmia. The *treatment* is by surgical measures, which are, however, by no means always successful.

ACCESSORY MEANS.—Both this and the former condition may be greatly benefitted by frequent cold or tepid baths, and occasionally employing *Calendula* lotion (ten drops of *Calendula* ϕ to two table-spoonfuls of water). If the deformity result from a cicatrix on the cheek, such as from a burn or abscess, and surgical measures have to be adopted for its removal, this will be an excellent topical application.

13.—Stye on the Eyelids (*Hordeolum*).

DEFINITION.—A stye is a small, painful boil, with slight inflammatory symptoms, projecting from the margin of the eyelids, having most probably its seat in a ciliary follicle.

CAUSE.—Scrofula or debility.

TREATMENT.—*Aconitum*.—Inflammation, pain, and restlessness. If given when the stye first begins to form, it often disperses it.

Pulsatilla.—This is the principal remedy, and should be the first administered when inflammatory symptoms are not very *marked*. It may also be given after, or in alternation with,

Aconitum, if the latter remedy was not given sufficiently early to arrest the disease.

Sulphur.—A dose night and morning, for a few days, for preventing a recurrence of the disease.

Silicea and Calcareo.—These medicines should be administered one week, each in succession, allowing an interval of two or three days between, and afterwards if necessary, repeating the course, to patients who are often troubled with these annoying swellings, especially in those of a scrofulous constitution.

AUXILIARY TREATMENT.—If the swelling is much inflamed it should be fomented with tepid water, and a bread-and-water poultice applied over the eye at night. If the sty is tedious in breaking, it should be opened with a lancet, or punctured with a needle, and the matter pressed out.

14.—Foreign Bodies in the Eye.

If sand, flies, or hairs, are between the lids and the globe, they should be removed immediately by bathing the eye in cold water; but if the substance cannot be removed in this manner, the eye should be gently wiped with a soft, moistened handkerchief, or with a feather, or a bent bristle may be used, the two ends being held by the finger and thumb. In one of these ways, with a little perseverance, the offending substance may generally be removed.

If small pieces of *flint or iron* become fixed in the front part of the eye, they should be most carefully picked out with a needle or point of a lancet.

When the foreign body is removed, a weak *Arnica lotion* should be applied to the eye by means of lint or soft linen, as before directed.

15.—Wounds of the Eye.

Wounds or blows of the eye are very serious, as they may cause dislocation of the lens, and the globe to become filled with blood.

TREATMENT.—*Arnica*.—The whole eye should be well covered with a piece of lint or linen, saturated with *Arnica* lotion (ten drops of strong tincture of *Arnica* to two table-spoonfuls of cold water); this should be covered with oiled-silk, and kept in position by a handkerchief. At the same time, two pilules or a drop of the diluted tincture of *Arnica* may be taken every three hours. If febrile symptoms are present, *Aconitum* may be alternated with *Arnica*; a dose every three or four hours.

ACCESSORY MEANS.—In all cases of blows or wounds, in addition to the use of *Arnica*, the patient should remain in a darkened room, and be kept quiet and cool, with the head slightly raised.

CHAPTER X.

AFFECTIONS OF THE EARS.

1.—Inflammation of the Ear (*Otitis*)—
Earache (*Otalgia*).

THE condition described by these terms is one of the most common affections of the ear. In strict language, *earache* ought to be confined to *neuralgia* of the ear, a condition known by sudden acute pain, which comes and goes capriciously, is not throbbing, does not increase in severity, and is not attended with fever.*

We have, however, classed these affections together, as

* For the Treatment, see "Neuralgia."

what is popularly called *earache* is pain of an inflammatory character.

SYMPTOMS.—Sudden and intense pain in the ear, sometimes so severe as to cause delirium; tenderness and soreness in the ear and its vicinity; various unnatural noises heard by the patient (*tinnitus aurium*); partial or complete deafness, or, in rare cases, a morbid sensibility to sound; the meatus is more or less swollen, red, tender, and dry. In very bad cases suppuration takes place, and the inflammation may even extend to the brain, and terminate fatally.

CAUSES.—*Cold*, especially *currents of cold air*; injudicious bathing; *not drying the ear after washing*; improper probing or syringing an inflamed ear. Inflammation may also come on during the course of general fever, more especially during “Scarlatina;” it may also arise from rheumatism or gout.

TREATMENT.—*Aconitum*.—Recent inflammation, from a cold, with severe throbbing or shooting pain. A dose every three or four hours, for several times.

Belladonna.—When the inflammatory symptoms are strongly marked, extend to the brain, and are attended with tearing or burning pains in the head, delirium, vomiting, coldness of the extremities, or other alarming symptoms. A dose every two to four hours. When the inflammatory symptoms are less violent, or after they have been controlled by *Acon.* or *Bell.*,

Pulsatilla is an effective remedy; its special indications being—sticking or tearing pains in and behind the ear, swelling, and a feeling as if the internal ear were closed. A dose every four or six hours.

Chamomilla.—Earache from cold or suppressed perspiration, the pains being almost unbearable; extreme sensitiveness, susceptibility, and irritability.

Mercurius.—Shooting pains in the internal ear, extending to the cheeks and teeth; soreness; discharge; swelling of the neighbouring glands.

Sulphur.—A dose night and morning for several days, is often of great utility after the employment of other remedies.

ACCESSORY MEANS.—Hot fomentations, poultices, or the steam of hot water, will mitigate the severity of the symptoms. A large boiled onion is a good domestic remedy; it should be applied soft and hot to the ear, and maintained in apposition by a bandage. Warm water, applied by a sponge or a piece of soft linen, will mitigate the pain without doing harm. Other applications, such as oils, ointment, cramming cotton into the ears, etc., should be avoided, as they often damage the parts. For other hints, see “General Remarks” (page 349–50).

2.—Discharge from the Ear (*Otorrhœa*).

This troublesome and offensive disease consists of a purulent or muco-purulent discharge from the external ear-passage, and should, if possible, be treated by a medical man.

CAUSES.—It is commonly met with in scrofulous children, and, in such constitutions, is likely to follow “Scarlatina,” and other eruptive disorders, or any exhausting illness.

TREATMENT.—*Mercurius*.—When the discharge is *thick*, bloody, and foetid, when it is accompanied by tearing pains in the affected side of the head and face; when the complaint follows *Scarlatina*, *Measles*, *Smallpox*, etc.; also, when there are swelling and tenderness of the glands about the ear. A dose thrice daily. If otorrhœa appear after *Scarlet-fever*, this remedy may be administered in alternation with *Belladonna*; an alternate dose every four hours.

Pulsatilla.—Discharge of a thin, watery character, and when it follows *Measles*.

Hepar Sulph.—Discharge of pus and blood, and when the patient has been dosed with *Mercury*.

Arsenicum.—Excoriating discharge, in *feeble* constitutions.

Calcareæ and *Sulphur* may follow any of the above remedies, especially in tedious cases, to complete the cure; the former may be administered morning and night for a week, to be followed, a couple of days intervening, by the latter.

GENERAL MEASURES.—The intractable character of this affection is often, in great measure, due to the neglect of that strict cleanliness which is so necessary to be observed. The irritating discharge, if allowed to accumulate within the meatus, undergoes decomposition, and gives rise to changes in the deeper structures of the ear, the nature of which may be inferred from the irritation and excoriation, so often existing in the external orifice. A little fine wool may be put into the ear when the discharge is declining, and frequently changed, to protect it in cold weather; but even this should be done with great caution, particularly if the discharge smells offensively, for nothing can be more prejudicial than stopping the ear with cotton wool to prevent its escape. In this affection, the use of the syringe by non-professional hands, is probably productive of more harm than good, and had therefore better be discarded; at least, it should only be used with great caution and gentleness to cleanse the ear, which should be immediately afterwards carefully dried. The improvement of the general health of the patient is a point of great importance; for this purpose, in addition to the remedies prescribed, change of air, and in the autumnal months, sea-air, is often attended with marked beneficial results. In the absence of sea-air, country-air, in a bracing district, is of great advantage.

3.—Deafness (*Dysecœa*).

This is often a symptom of general disease of the system, the removal of which is necessary in order to restore the function of hearing.

CAUSES.—Sudden loud noises; blows on the head, or fracture, which lead either to concussion or rupture of the auditory nerve. A frequent cause is *obstruction* from swelling of the lining membrane, accumulation of ear-wax, or other substances lodged in the ear-passage. Deafness sometimes occurs in connection with chronic diseases of the ear, or as the result of organic alterations in the brain.

PROGNOSIS.—*Recent* cases of deafness are generally quickly cured by skilful homœopathic treatment; even when the deafness is of *long standing*, and both ears are affected, and the case presents greater difficulties, still a persevering use of appropriate remedies is often rewarded by greater or less success.

TREATMENT.—*Classified cases of deafness.*—

1. *Deafness from cold or rheumatism*: Merc., Calc. Carb., Puls., Bry., Bell., Ars., or Sulph.

2. *After fevers and nervous disorders*: Phos., Phos. Ac., or Verat.

3. *After a suppressed discharge from the nose or ears*: Hep. S., Bell., or Puls.

4. *After measles*: Carbo V., or Puls.

5. *After scarlatina*: Bell., or Hep. S.

6. *After small-pox*: Merc., or Sulph.

7. *From enlargement of the tonsils*: Merc. Iod., Aur., or Nit. Ac.

8. *From abuse of mercury*: Hep. S., Aur., or Nit. Ac.

Mercurius.—Deafness accompanying rheumatism or catarrh, when the throat and glands of the neck are swollen, or after a suddenly-suppressed discharge from the nose or ears. Also for deafness after small-pox, roaring and buzzing sounds in the head, and tendency to profuse perspiration.

• *Dulcamara*.—Deafness with a cold from exposure to damp or wet.

Nux Vomica.—Buzzing, tingling, or whistling noises,

particularly whilst eating; with derangement of the digestive organs.

Calcareo Carbonica.—Sensations as if the ears were obstructed; humming noise, or throbbing and heat in the ears; too great dryness or discharge from the ears; oppressive headache.

Phosphorus.—Deafness of nervous persons, or following any nervous disorder.

Moschus.—This is also an excellent remedy in deafness with great nervousness, or following any nervous fever.

Bryonia.—Deafness in rheumatic persons, especially if the head or neck has been affected by rheumatism.

Administration.—In recent cases, the remedy may be taken three times a day; in chronic, once or twice.

ACCESSORY MEANS.—If possible, the cause of deafness should be ascertained with a view to its removal. If found to arise from an accumulation of hardened ear-wax, this should be extracted by skilful hands as early as possible. Before attempting its removal it is generally necessary to syringe the ear with tepid water. All reputed remedies which have to be dropped into the ear should be eschewed, however much they are recommended.

WET COMPRESS ON THE NECK.—A small wet compress, covered with oiled-silk or tissue, worn over the nape of the neck, as recommended for ophthalmia, is equally applicable to affections of the ear, especially of an obstinate nature; and if persevered in steadily for some time will frequently cure, or at least relieve, deafness.

4.—Foreign Bodies in the Ears.

Children seem to take pleasure in introducing various substances into the ear-passage; hence, peas, slate pencil, glass beads, shells, etc., or cotton wool which has been forgotten,

or a portion of which only has been removed, are occasionally met with. If permitted to remain, such substances may occasion immediate symptoms of inflammation and deafness; in other instances, they may continue a long time, till difficulty of hearing or uneasiness in the ear, leads to an examination of the tube. Any such body should be removed as speedily and as gently as possible, either by syringing the ear with warm water, or by means of small dressing forceps, or other suitable instruments. If it cannot be removed by gentle means, the case should be submitted to a surgeon, so that a careful examination may be made by means of the ear speculum, and the aid of sunlight or a lamp. This examination is necessary for two reasons; for although a foreign body, if present, may generally be seen without such means, still the absence of such body cannot be affirmed without a complete exploration of the tube. Further, instances often occur in which surgeons are requested to remove a foreign body when none exists, and a proper examination with the speculum would often prevent any injudicious meddling of the ear with instruments. A late eminent hospital surgeon is said to have dragged out the little bones of the ear (*stapes*) whilst attempting to find a small nail, which was not in the ear at all! A careful exploration of the canal, as above suggested, would have prevented such a serious practical mistake. Any soreness or inflammatory symptom that may ensue from the foreign body, or the attempts at extraction, should be met by washing the ear with a weak *Arnica* lotion (six drops of *Arnica* ϕ to two tablespoonfuls of water), and afterwards enveloping the ear with a rag wrung out of the lotion, and covered with oiled-silk.

5.—Noises in the Ears (*Tinnitus aurium*).

These noises are variously compared to the whistling of the wind, the hissing or singing of a tea-kettle, the ringing of a bell, the beating of a drum, etc. For their treatment, a medical man should be consulted. These symptoms seldom exist alone, being generally connected with the incipient stages of some disease of the ear, such as deafness, otorrhœa, etc., or they may be produced by cold.

When peculiar ringing noises in the ears occur in acute disease, they are generally the result of congestion of the cerebral vessels, too strong throbbing of the arteries of the temples, or some morbid condition of the brain itself. When this deprivation of the sense of hearing is more or less constant, and not depending upon disease of the ear, or closure of the Eustachian tube, it may be regarded as a grave symptom indicating derangement of the vessels of the brain, and the harbinger of apoplexy or paralysis. Old people who neglect to take sufficient out-door exercise, and women who suffer from nervous exhaustion, or uterine disease, often complain of these annoying sounds. In these latter cases, the phenomena often cease on the removal of the causes which gave rise to them.

6.—General Remarks on Affections of the Ear.

1st.—A frequent cause of disease of the ear is the reprehensible practice of leaving the head and ears of children wet or imperfectly dry after bathing or washing. This danger is the more necessary to be guarded against if there already exists any discharge from the ear. After bathing, or the ordinary morning or evening wash, the greatest care should be taken to dry the hair and ears thoroughly, especially if the health is not robust. As a

further precaution in such cases, a piece of fine linen or a piece of blotting paper should be twisted into a coil, and introduced into the cavity of the ear, to absorb any remaining moisture.

2nd.—Parents, governesses, and others, who have the care of children, should be aware of an accident very liable to occur from blows on the head or boxing the ears, as it is termed, namely, laceration of the *membrana tympani*, a membrane which closes the bottom of the meatus, and is stretched something like the parchment of a drum. The accident may be recognised by a sense of shock in the ear, deafness, and a slight discharge of blood from the orifice; and if examined by an ear speculum, the rent may be seen. If treated by a non-professional person, the writer advises *complete rest* for several days, and the use of *Arnica lotion*, as directed under “Foreign bodies in the Ears.”

3rd.—Another point of considerable importance, to which attention has been called by Mr. J. C. Forster, is the case in which a child, from being slightly deaf, has been thought to be stupid or obstinate. “Very sad,” as that gentleman observes, “is it to think how often a child is thus punished for his misfortune, and, it may be, irremediable injuries inflicted on the mind or temper of this poor victim of unintentional injustice. It is hardly necessary to insist upon the care which is requisite in examining the state of the hearing power in a child, or to refer to the fact that children will often say, and doubtless think, that they hear a watch when they do not.”

4th.—Lastly, a remark may here be appropriately made, bearing on the treatment of the diseases of the ear. In all *chronic* affections of this organ, the higher dilutions (6 to 12) of the different medicines are generally more efficacious than the lower (1 to 3).

CHAPTER XI.

AFFECTIONS OF THE MOUTH, TEETH, NOSE, ETC.

1.—Offensive Breath.

IN perfect health, the odour of the breath is sweet and agreeable; on the contrary, foetid breath is usually a concomitant of disordered digestion, scurvy, malignant sore throat, etc.; it is also disagreeable and infectious during the progress of the eruptive, typhoid, and pestilential fevers; but in no disease is it more offensive than in *gangrene* (mortification) of the lung; indeed, this condition may be recognised by this symptom alone.

Sometimes offensive breath arises from inattention to the mouth and teeth; in this case the remedy is obvious, namely, careful cleansing of the teeth and mouth after meals, especially when animal food has been eaten.

TREATMENT.—Ascertain, if possible, the cause. If it appear to depend upon indigestion, or any other complaint, proceed according to directions given in other parts of this manual. Competent advice, however, founded upon the history and circumstances of the individual case, is almost invariably required. In the absence of the advice of a physician, the following medicines may be tried.

Carbo Veg.—Putrid odour of the breath from decayed teeth, bad condition of the gums, large doses of *Mercury*, or other causes. A dose thrice daily, for eight or ten days, or as long as may be necessary.

Hepar Sulph., or *Nitric Acid*, may follow this remedy, especially when it is insufficient to correct the evil, and when the complaint is the result of previous salivation with *Calomel*.

Mercurius.—Foetid breath from a sore or aphthous condition of the mouth.

Nux Vomica, or *Pulsatilla*, should be selected when the complaint cannot be traced to any definite cause. A dose night and morning, for a week or ten days.

Sulphur, night and morning for a week, may follow any of the preceding remedies, and complete the course. After an interval of a few days, if necessary, the course may be repeated.

Aur., or *Puls.*, are suitable remedies when the complaint occurs in females advancing towards womanhood.

ACCESSORY MEANS.—General attention should be given to diet, the internal and external use of water, pure air, regular out-door exercise, and such other means of promoting good health as are indicated in the first chapter of this book. Animal food should be eaten with great moderation; and the teeth and mouth should be carefully cleansed at least twice a day.

Consult also “Local Measures,” under “Toothache.”

2.—Thrush (*Aphthæ*)—Frog.

SYMPTOMS.—Small vesicles or white specks appear upon all parts of the lining membrane of the mouth, and are sometimes so connected as to form a continuous covering over the tongue, gums, palate, and, in bad cases, through the intestinal canal. Though arranged under “diseases of the mouth,” it is by no means limited to this part. It is usually accompanied with other symptoms, such as feverishness, sickness, diarrhoea, and, in fatal cases, with typhoid symptoms. The disease most frequently occurs in infants at a very early age.

CAUSES.—A weakly, unhealthy constitution; a bad quality of milk from an unhealthy or intemperate nurse; an improper quality or quantity of food in children brought up by

the bottle or spoon; neglect of cleanliness, etc. When thrush occurs in adults, it is usually the result of some other malady; it is then always serious, and often an indication of speedy dissolution. In consequence of the disease chiefly affecting infants, or adults in the last stage of disease, it has been called the first and the last disease.

TREATMENT.—*Mercurius*.—Is indicated by dribbling of saliva, diarrhœa, colicky pains, offensive breath, and by the eruption shewing a tendency to ulceration. If this remedy is administered when the white specks first appear, it is often sufficient to cure without the aid of any other remedy. A dose every six hours for several days.

Borax.—This is an old but very appropriate remedy; and is an instance of the accidental practice of homœopathy before its principles had been recognised. It is chiefly indicated when the disease has extended to the coats of the stomach and intestines, and is but rarely required at the commencement of the disease, when *Mercurius* will be found more efficacious. The patient's mouth may be washed with a solution of *Borax* (four grains of *Borax* to one ounce of water) by means of a soft brush; or the aphthous parts painted with a mixture composed of one-third of *Borax* and two-thirds of honey. The application should be made several times a day; and is alike required whether the disease occurs in adults or infants. The local application of *Borax* should be accompanied by its internal use; a powder of the 3rd dec. trituration thrice daily.

Arsenicum.—Dangerous forms of thrush, the eruption becoming brown or black, bleeds easily, and emits an offensive smell; the disease covers the entire mouth, throat, and even extends to the alimentary canal. The patient becomes much exhausted and emaciated, and there is often distressing diarrhœa. A dose every four hours.*

* Directions for the doses of infants are given at page 49.

Carbo Vegetabilis.—This has similar indications to the last remedy, and may be given if that fail to effect more than a partial cure.

Sulphuric Acid.—In tedious cases, accompanied by debilitating diarrhoea, night sweats, etc., this remedy often either arrests or modifies the disease, when other remedies fail. It may be given internally, and as a weak gargle.

Sulphur.—This remedy may follow *Mercurius*, or any other, if the latter is insufficient to cure; or, when the eruption has nearly subsided, to prevent a relapse. Cutaneous eruptions, sour-smelling breath, etc., are indications for this remedy. A dose morning and night.

GENERAL DIRECTIONS.—Cleanliness, ventilation, fresh air, and proper diet, are necessary in preventing or curing thrush. When the complaint has been caused by ill-health of the mother or nurse which cannot be soon cured, the infant should be weaned and fed with *Sugar of Milk*, by which a nearly exact imitation of maternal milk may be formed. In all cases in which infants are wholly or partly deprived of breast-milk, or if the mother's milk is deteriorated in quality, this article may be substituted. It is economical, easily prepared, and is undoubtedly superior to all other kinds of food for tender infants deprived of a proper supply of healthy breast-milk.*

Formula.—It is prepared for use as follows:—Dissolve one ounce of the *Sugar of Milk* in three quarters of a pint of boiling milk. Mix as wanted with an equal quantity of fresh cow's-milk, and feed with a suckling bottle.

3.—Hare-Lip.

VARIETIES.—This is a congenital fissure of the upper lip, of which there are several varieties. It is called *single*

* Sugar of Milk for infants' food, with appropriate bottles, may be procured at any Homœopathic Pharmacy.

hare-lip when it affects one side ; *double*, when it is present on both sides. It may be confined to the lip, or it may involve the hard and soft palate to any extent. In the latter case, the malformation is much more serious, and children so affected being unable to form a vacuum in the mouth to suck, usually die at a very early age.

CAUSES.—Arrest of development, and want of union of the lateral with the central portion of the lip. Like some other deformities, hare-lip often runs in families, instances occurring in which several children of the same parents have been so affected.

TREATMENT.—A surgical operation is in all cases necessary, and it may be consolatory to those having children so affected to know that under favourable circumstances the operation is completely successful. An important point connected with the operation is the time at which it should be performed ; namely, either before the child is six months old, or after it is two years old, but not between these periods ; because the primary dentition may be going on, and the child's system being irritated, adhesion will not easily take place ; or if it should, the wound may easily break open again. Of the two periods, the earlier is the better, as the child is not under the influence of fear, is consequently more manageable, and the cicatrix will be less apparent in after life. If the deformity extends to the upper jaw-bone, so that the mouth is laid open into the nose and prevents the child imbibing a sufficient amount of nourishment, the operation should be performed at the very earliest period ; for although the danger from loss of blood is greater than at a later period, it is much less than that from the imperfect nutrition which results from the deformity.

4.—Toothache (*Odontalgia*.)

CAUSES.—Decayed teeth are the most common *predisposing* cause; and sudden changes of temperature, derangements of the digestive organs, pregnancy, and general bad health, are the most frequent *exciting* causes. When the cavity of a tooth has been exposed by caries, the delicate nerve which ramifies in the pulp is extremely liable to pain from contact with food, liquids, or atmospheric air; and if the health be much impaired, or the central pulp greatly irritated, acute inflammation with extreme pain may result.

NEURALGIC TOOTHACHE.—This occurs in teeth either quite sound or partially decayed, and may be recognised by its occurring in paroxysms which come and go suddenly. Sometimes toothache has the character of *Chronic Rheumatism*, flying about the jaw, extraction affording no relief from the pain.

TREATMENT.—If *Creasote* or *Laudanum* has been used as a local application, the mouth should be thoroughly cleansed before taking any of the remedies recommended in this section. After three or four doses have been taken without any mitigation of the symptoms, another remedy should be selected.

LEADING SYMPTOMS IN TOOTHACHE.—In the following classification the remedies are named in the order in which they are most frequently required:—

1. *Toothache from cold*.—Merc., Bry., Dulc. (*from wet*), Cham. (*from a draught*), or Puls.
2. *Rheumatic Toothache*.—Bry., Rhus Tox., Merc., Arn., Bell., or Acon.
3. *From Decayed Teeth*.—Staph., or Merc.
4. *Nervous Toothache*.—Ign., Cham., or Coff.
5. *Pains extending to neighbouring parts*.—Merc., Bell., Puls., or Cham.

6. *With Swelling of the Face or Gums.*—Cham., Merc., Bell., or Bry.

7. *With increased flow of Saliva.*—Merc. Cor.

8. *Toothache during Pregnancy.*—Bell., Puls., Nux. V., Cham., or Calc.

9. *In Children.*—Acon., Cham., Calc., or Ign.

For detailed symptoms, see under the following remedies, or the *Materia Medica*.

Chamomilla.—Toothache brought on by a draught of air, or sudden *suppression of perspiration*, and affecting the ear, causing earache; the teeth feel too long and loose; the cheek and gums are swollen, but the skin is not very red; and the pains are aggravated by eating or drinking, especially by warm drinks. It is particularly suited to children during teething, with watery, greenish, foetid diarrhoea.

Belladonna.—Drawing, lacerating, or shooting pains, affecting several teeth on one side, so that it is impossible to point out the exact tooth; the pains shift about (rheumatic), and are increased by contact or by warm or cold applications; the teeth feel long, and as if they would start out of their sockets; determination of blood to the head, swelling of the cheek or glands, dryness of the mouth and throat, etc. In children, the gums are red and swollen, and they are sometimes delirious, or there may be spasms and convulsions.

Mercurius.—Decayed teeth; violent scraping or lacerating pain in the cheek-bones, shooting pains, or pains aggravated by eating or drinking, and also at night in bed; pains affecting the entire side of the face and extending to the temples, glands, and ears; ulceration, bleeding, and discoloration of the gums and mouth; toothache with salivation (not caused by *Mercury*); profuse perspirations, which do not afford relief; rheumatic pains in the bones and limbs.

Staphysagria.—Pains from decayed teeth or stumps.

involving even the head and ears, and aggravated by drawing in cold air, or by cold drinks, and during or after eating or touching the tooth; the teeth rapidly decay, become black, or exfoliate, and there are painful excrescences on the gums, which are very liable to bleed.

Pulsatilla.—Throbbing or digging pain, extending from the decayed tooth to the eye, with semi-lateral headache; *the pains are worse in a warm room*, in the evening, and in bed, or when eating or drinking anything *warm*, but are mitigated by cold air or water. This remedy is most adapted to mild persons of light complexion, and to females, especially those suffering from scanty or suppressed menstruation.

Causticum.—Toothache with a sensation as if the teeth were *elongated*, and the pains are *darting*.

Nux Vomica.—Drawing and boring pain in a decayed tooth, with occasional stitches which rack the whole body, increased by drawing in air, and worse on waking in the morning, or when engaged in mental labour. It is specially adapted to persons of a dark or florid complexion, and of a lively or irritable temperament; to toothache caused by the excessive use of coffee, wine, or spirits, and to persons who lead a sedentary life, and are engaged in intellectual labour.

Bryonia.—Rheumatic toothache, worse in warmth, but relieved for a time by cold applications. The pains are drawing or jerking, with looseness of the teeth and a feeling as if they were too long, especially on eating.

Arnica.—Toothache caused by any mechanical injury, as a blow or contusion, or from *extracting, plugging, or filing the teeth*. In such cases, great relief will be experienced from rinsing the mouth with a mixture of about one part of the strong tincture of *Arnica* to ten of water.

Hepar Sulphur.—Pain from an incipient gum boil; loose teeth; and after large doses of *Mercury*. *Carbo Veg.* may be taken under similar circumstances, if *Hepar* fail to cure.

Aconitum.—Full-habited patients, with flushed face, hot, swollen gums, thirst, restlessness. It is also well adapted to children during teething, often in alternation with *Bell*.

Administration.—About every fifteen or twenty minutes till the pain is mitigated; afterwards, every three or four hours.

LOCAL MEASURES.—STOPPING CARIOUS TEETH.—If the caries be recent and slight, the decayed portions should be removed, and the cavity filled with a suitable material, by a skilful dentist. If the patient be suffering from severe toothache, this should be first removed before the cavity is stopped. When it is not practicable to have a tooth stopped by a professional dentist, its cavity should be filled with white wax, which, by excluding the atmospheric air and the irritation of food, retards the progress of decay. But a better and more durable stopping, for non-professional persons, is *gutta-percha*,* which, if carefully introduced, after thoroughly cleaning out the affected tooth, may preserve it as a useful member for years.

EXTRACTION OF TEETH.—In a few cases, probably not more than two in a hundred, the only remedy for toothache is *extraction*; especially if the decay has proceeded so far as to blacken the tooth, rendering it loose and useless for mastication, prejudicial to neighbouring teeth, and a cause of offensive breath. On the other hand, say in ninety-eight cases out of a hundred, considerable experience justifies us in stating, that the most distressing cases of toothache are promptly cured by Homœopathic remedies. Our advice, therefore is, never extract a tooth merely because it aches, or has *begun* to decay; skilful treatment is usually sufficient to remove the pain; and, subsequently, local and general measures will prevent a recurrence of the trouble.

* Gutta-percha, prepared for this purpose, may be procured from most Homœopathic chemists.

MEANS OF PRESERVATION.—The function of the teeth is so important in preparing the food for the stomach, that their preservation is a matter of the highest importance. To this end, the teeth should be kept clean, and contact with any disorganizing agent avoided. It is an excellent practice to keep the mouth sweet by rinsing it with pure cold water, and brushing the teeth with a soft brush every morning; and, if possible, after every meal, especially when animal food has been used. Medicated tooth powders—*Camphor*, *Creasote*, *Laudanum*—are generally injurious; the unmedicated dentifrices, as prepared by homœopathic chemists, are the best. If *Laudanum*, *Creasote*, or similar drugs, mitigate the symptoms, it is often only for a brief period, the pain soon returning with increased violence. The practice of taking very hot substances into the mouth should be avoided, as the expansive power of heat may rupture the enamel, and become the nucleus of decay. On the other hand, the habit of subjecting the teeth to the opposite extreme of temperature, as by sucking ice, etc., is also to be avoided. Chewing or smoking tobacco, and the habitual use of strong drinks, tend to destroy the teeth. Lastly, as an important means of preserving the teeth, the general health, especially of the digestive organs, should be maintained in the highest possible state of integrity, by the use of plain, nourishing food; cold sponging or bathing in the morning, followed by good friction with a large towel; early and regular habits; and, if necessary, appropriate Homœopathic treatment, eschewing, especially, large doses of drugs.

5.—Teething (*Dentition*).

There are two sets of teeth; the first appears during the early period of life, and is called the milk teeth; this set *falls out* in the seventh or eighth year, to be replaced by a

permanent set, which is not completed till the commencement of adult life. The order in which the milk teeth appear is generally as follows:—about the sixth month the two middle incisors of the lower jaw, followed in a few weeks by the corresponding incisors of the upper jaw; next appear the two outside incisors of the lower jaw, and soon after those of the upper; after another interval of perhaps about two months, the first four molars, then the eye teeth, and, lastly, four other molars, completing by about the second year the teeth of the first set. Should there be any little deviation from this order, or should dentition be a little prolonged, no great importance need be attached to it.

The changes occurring during the first dentition render the period an important one in the child's history. Concurrently with it, the whole organization appears to receive a new impulse. The face, hitherto without expression, receives distinctness of features; the eye acquires expression, the mind appearing to speak through it; the rounded facial outline becomes oval, the teeth separating the jaws further; the forehead becomes more expanded, and the general expression of the features are but signs of an evolution which is pervading the whole organism, of which the change in the teeth forms but an inconsiderable part.

DANGERS OF TEETHING.—This process being a natural one, should not certainly be regarded as in itself a disease, still less a dangerous one, but simply a natural period of the development of the child's organism. At the same time, the increased activity and excitement in the vascular system, combined with the nervous irritation which almost invariably attends dentition, may, in delicate or strumous children, give rise to a greater or less amount of local or constitutional disturbance. The period at which dentition occurs is important. In too early dentition, the constitution is rarely sufficiently strong to sustain the evolutions it has to under-

go; while in late dentition, there is a languid condition, indicative of a scrofulous constitution. In either case, domestic treatment should scarcely be trusted to.

SYMPTOMS.—Irritation in the mouth, swollen or tender gums, and increased flow of saliva; frightened startings or interrupted sleep; sudden occurrence of febrile symptoms; various eruptions on the head or body; derangement of the digestive organs—either diarrhoea or constipation, and sometimes spasms and convulsions. These symptoms are referred to under the several remedies which follow, and most of them are separately treated of in other parts of this volume under their respective headings, and may be found by the index.

CAUSES.—Excessive quantities of food, or improper food; keeping the head too hot; strumous constitution, and local affections of the gums, as inflammation, or disproportion between the jaw and the number and form of the teeth.

TREATMENT.—*Aconitum* is generally the proper remedy at the commencement, when there exist heat, redness, pain, restlessness, swollen gums, etc. *Acon.* is a remedy of much importance in the diseases of children.

Mercurius.—Nocturnal diarrhoea, the motions being bilious, mucous, or bloody, with straining, colic, perspiration, etc.

Chamomilla may follow *Acon.* when there exist dry cough, short breathing, much crying, tossing about, twitching of the mouth and face, loose, green, or frothy stools, and griping pains. *Cham.* is a sovereign remedy in many of the ailments connected with dentition.

Nux Vomica.—Torpidity and sluggishness of the intestinal canal, especially in irritable children with dark complexions, and when costiveness is traceable to improprieties in the diet. This remedy, if it does not fully answer, may be followed by *Opium* or *Bryonia*.

Belladonna.—Great agitation; frightened starts during

sleep; red, brilliant, convulsed, fixed, or unsteady eyes; convulsive movements of the limbs; congestion and throbbing of the blood-vessels of the head.

Coffæa.—Extreme irritability, excitability, sleeplessness, frequent changes from tears to laughter; especially in the absence of fever.

Calcaria.—*Slow* or *late* dentition, especially in strumous children, liable to relaxed bowels, with loss of flesh and strength.

Silicea.—Similar symptoms to those of *Calcaria*, especially when the teeth, though on the point of coming through, are still tardy. This medicine, as also the former, often supersedes the operation of lancing the gums.

Ars., *Ipec.*, and *Sulph.*, are remedies also sometimes required.

ACCESSORY TREATMENT.—See under the next section.

6.—Infantile Convulsions—Fits.

Infantile convulsions are the most frequent of the cerebral affections of children, and are usually from some eccentric cause, as teething, but sometimes the forerunner of hydrocephalus.

SYMPTOMS.—In slight cases, the child suffers from twitchings of the muscles of the face, some difficulty of breathing, rolling of the eyes, etc. In severer cases, the child suddenly becomes insensible, and the muscles of the head, neck, and extremities, are convulsed in various directions; the eyes are insensible to light, and turned rigidly up and to one side; the face is congested but sometimes pale; the lips livid, and there is frothing at the mouth; the hands are generally firmly clenched, and the thumbs turned inward, with the fingers on it; the soles of the feet are turned together, with the great toe bent into the sole, from the greater irritability of the flexor muscles. After one or two minutes the con-

vulsions cease, either altogether, or recur again in a short period.

CAUSES.—Irritation of the brain from pressure of a tooth upon an inflamed gum, or anything which over-excites the nervous system; disease of the brain; an insufficient supply of blood to the brain, as in badly-fed children, or an impure supply of blood, as in the eruptive fevers; the irritation of worms; fright; powerful emotions of the mother; suppressed eruptions; indigestion. The remote causes are, hereditary predisposition, too early or too late marriages, etc.

TREATMENT.—Loosen all clothing about the neck, chest, and body; raise the head, sprinkle the face with water, and admit plenty of fresh air. A warm bath, however, is generally advisable.

WARM BATH.—Immerse the child in warm water up to its neck, and at the same time apply a cold wet towel to the head; the cold applications may be made for about three minutes, but the child kept in the bath for ten or fifteen minutes. The temperature of the bath should be about 92°, or what is agreeable to the back of the hand. The warm bath acts beneficially by bringing blood to the surface of the body, and thus relieving internal congestion; it also soothes the cutaneous nerves.

Belladonna.—Convulsions, with determination of blood to, or inflammation of, the brain, hot and flushed face, especially in stout children, who start suddenly in sleep, stare wildly, the body or limbs being convulsed, sometimes with clenching of the hands and involuntary urination. It should be given early, and repeated every fifteen minutes for several times. A drop of the tincture in a teaspoonful of water, or one or two pilules on the tongue.

Chamomilla.—Spasmodic twitching of the eyelids and muscles of the face, one cheek red and the other pale; *clenched thumbs*, especially in irritable children, and in fits *from indigestion*.

Opium.—Spasms, followed by *stupor*, laboured breathing, confined bowels; convulsions from *fright*.

Cuprum.—Red, bloated face, shrieking before the attack, convulsive movements, the paroxysm resembling an epileptic seizure.

Cina or *Ignatia*.—Convulsions from thread worms.

Aconitum.—Fever, restlessness, flushed face; also for *threatened* convulsions.

Dose and Repetition.—See page 49.

ACCESSORY TREATMENT.—Diarrhœa arising during dentition, unless very excessive, should not be interfered with. It may be regarded as an effort of nature to relieve congestion to the head. “Keeping the head cool and the feet warm,” washing the child, especially the head, with cold water daily, and taking it out much in the open air in favourable weather, render it much less liable to illness during teething. From this it may be inferred that caps and warm coverings to the head, even during the night, are prejudicial; they tend to produce determination of blood to the brain or its coverings, which may occasion alarming or fatal consequences. Purgatives should be avoided, and the bowels regulated by suitable diet, or by Homœopathic treatment. In obstinate constipation, injections should be had recourse to; also in convulsions occasioned by worms. Costiveness in infancy is entirely due to errors in diet. The mother or nurse should carefully abstain from all articles of food and drink of an indigestible or stimulating character. As an article of diet for children brought up by hand, we strongly recommend the *Sugar of Milk*, as referred to under “Thrush.”

DISEASED MILK.—The highly objectionable character of the milk yielded by cows in the cowsheds of London and other large cities, is a subject of great importance to children fed by the bottle. Even with all the advantages arising

from the recently-legalised inspection and licensing of cow-sheds, and the constant cleansing, whitewashing, and improved ventilation, the milk of stall-fed cows is poor, watery, innutritious, and in many cases, from containing globules of pus, is decidedly unwholesome, many instances of disease and ulceration of the alimentary canal of infants being readily traced to the diseased milk on which they are fed. So strongly has this evil impressed itself on the Vestry of St. James's, Westminster, that they have now determined not to license any cowshed in the parish.

7.—Polypus of the Nose.

DEFINITION.—A polypus is a pendulous mass growing from any mucous surface, but chiefly from the nose, ear, throat, womb, and rectum. The term is used to denote any kind of pendunculated tumour attached to a mucous surface.

A nasal polypus is usually of the gelatinous kind, composed of the elements of mucous membrane, expanded; it is pear-shaped, yellowish, and consists of several soft straw-coloured tumours, streaked with a few blood-vessels, hanging from the upper spongy bone, which are apparently hypertrophied growths from the submucous areolar tissue, and of the subjacent parts, to which it is attached only by a very narrow neck. It is of such loose texture as to imbibe the atmospheric air, which renders it larger in damp weather than in dry.

SYMPTOMS.—A nasal sound in the voice; the patient acquires the habit of keeping his mouth open to facilitate breathing; difficulty of swallowing liquids; the nose is enlarged externally on the affected side; and on looking up the nostril the polypus may be observed. In consequence of the symptoms of *stuffing* which a polypus occasions, it may at first be mistaken for a cold in the head. At times, however, the polypus rises into the upper part of the meatus,

leaving this portion of the air-passage free, thus enabling the patient to breathe almost naturally. But on the nose being violently blown, the polypus descends and appears near the orifice, causing the obstruction to return, contrary to the usual result of such an operation.

TREATMENT.—The following remedies are most to be depended upon in this affection:—*Calc.*, *Phos.*, and *Sepia*; and sometimes *Puls.*, *Staph.*, or *Silic.* Commence with *Calc.*, a dose night and morning for ten or fourteen days; then wait a few days and repeat the remedy, or commence with the one next mentioned.

If discovered early, the above medicines may prove successful in arresting its growth, and so altering the condition of the mucous membrane, that it will no longer favour such growths. Should a polypus, however, attain such a size as considerably to obstruct the passage, it should be removed by a surgeon, by means of the silver wire snare. After this, a persevering use of one or more of the remedies may be adopted, in the confident hope that the tumour will not grow again, but without which it almost uniformly returns.

8.—Loss of Smell (*Anosmia*).

When this is owing to a cold, which sometimes induces a paralytic condition of the olfactory nerve, *Merc.*, *Puls.*, or *Sulph.* will be appropriate. When this condition has become chronic, a selection may be made from the following, and its use persevered with for ten days or a fortnight: *Silic.*, *Sep.*, *Calc. Carb.*, or *Zinc*.

9.—Ozoena.

NATURE.—Ozoena, so called from its foetor, consists of ulceration of the Schneiderian membrane (the mucous membrane lining the nose), from which an offensive purulent matter is discharged through one or both nostrils.

SYMPTOMS.—Inflammation and swelling of the sides of the nose, attended with sneezing; discharge of mucus obstructing the nostrils; sometimes slight hæmorrhage; or, as the disease extends, the mucus assumes the character of pus.

CAUSES.—A scrofulous constitution is a frequent predisposing cause, and a severe or neglected catarrh is an exciting cause. Sometimes it has a syphilitic origin.

TREATMENT.—*Aconitum*.—Half a dozen drops of the strong tincture of the root, in a tumbler of water; a dessert-spoonful every three hours, for a day or two. Afterwards, one of the following remedies may be selected.

Aurum.—Very offensive discharge, especially if the disease has arisen from the abuse of *Mercury*.

Nitric Acid.—Syphilitic ozæna. This remedy is particularly indicated if the patient has been drugged by large doses of *Mercury*.

Iodide of Mercury.—Purulent, thick, and offensive discharge, in an advanced stage of the disease, and when it arises from syphilis or scrofula.

Arsenicum.—Ichorous, foetid, and malignant discharge, particularly if the patient is much shattered in constitution.

Puls., *Lyc.*, *Sulph.*, may also be required in the early stage of the disease; *Calc.*, *Hep. Sulph.*, *Merc.*, *Coni.*, *Thuja*, in the latter stage.

Dose and Administration.—See page 49.

ACCESSORY MEANS.—The nasal cavity should be well syringed out, once or twice a day, with tepid water, to which a few drops of the chloride of zinc have been added, so as to wash away all clots and collections of matter. This affords considerable comfort to the patient, modifies the foetid odour of the breath, which is so offensive to others, and facilitates recovery. If the disease arise from catarrh, the inhalation of the steam of boiling water every evening, and removal to a dry, bracing atmosphere, will be appropriate adjuncts to the medicinal treatment prescribed.

10.—Quinsy—Sore Throat (*Tonsilitis—Cynanche Tonsillaris*).

DEFINITION.—Quinsy, or common inflammatory sore throat, consists in acute inflammation of the tonsil or tonsils, and of the subjacent mucous membrane, and is indicated by pain and considerable swelling of the tonsils, and general fever.

SYMPTOMS.—It comes on quickly, with rapid swelling of one or both tonsils, severe throbbing pain, hoarseness, and difficult swallowing and expectoration, occasioning a painful and almost a constant effort to bring up and detach the viscid mucus which adheres to the inflamed surface; headache; pain in the back and limbs; foul tongue; offensive breath, and general febrile symptoms. In ordinary cases, or even in severe, if the disease is promptly and skilfully treated, the pain, swelling, and other inflammatory symptoms subside in a few days, leaving the tonsils enlarged; otherwise, matter forms, which is indicated by rigors, and throbbing, darting pains in the throat, extending to the ears. When the abscess is fully mature, it bursts, to the immediate relief of the patient. Often the abscess forms in one tonsil, and after its discharge another forms in the other.

CHRONIC ENLARGEMENT OF THE TONSILS.—Repeated attacks of acute inflammation, or attacks but partially cured, are followed by chronic enlargements and indurations, causing difficult swallowing, hoarse voice, noisy and laborious breathing, especially during sleep, affections of the ears from continuity of the mucous membrane, and extreme liability, from slight causes, to a frequent recurrence of acute inflammation.

CAUSES.—The *predisposing* causes are, scrofulous constitution, the abuse of *Mercury*, disorders of the digestive organs, and previous attacks of quinsy. The *exciting* causes are—cold, atmospheric changes, wet feet, etc. Quinsy is most frequent in young persons of plethoric habit, between

fourteen and twenty years of age, and for several years is liable to occur frequently unless preventive means are adopted.

DANGERS.—When the inflammation extends to the uvula, the soft palate, the salivary glands, the pharynx, and particularly to the root of the tongue, and when the breathing becomes difficult, it is then extremely perilous. But early and skilful treatment will ordinarily prevent the malady assuming such serious forms.

TREATMENT.—*Aconitum*.—The patient is feverish, chilly, thirsty, and complains of headache, dizziness, and restlessness; he experiences a sensation of stinging, pricking, fulness, or even of choking in the throat, which on examination looks red as if scorched.

Belladonna.—Dry throat, with burning, rawness, and, on drinking, a kind of suffocating spasm in the neck, which is swollen; redness of the face, glistening of the eye, and pain and difficulty in swallowing. A valuable remedy, either after, or in alternation with, *Aconitum*.

Mercurius.—Swollen throat; copious accumulation of saliva in the mouth; swelling of the gums and of the tongue; shooting pain on swallowing; an inclination to swallow the saliva, although painful; a disagreeable taste in the mouth; foetid odour of the breath; ulcers on the sides of the mouth; pains extending from the throat to the ear. Profuse perspiration, and aggravation of the symptoms at night, also point to this remedy. If the practitioner has a choice of remedies, the *Iodide of Mercury* will be found more efficacious than either of the preparations given in the list, page 47.

Hepar Sulph.—Inflammation of the tonsils (*tonsilitis*) after matter has formed. It is especially useful in scrofulous constitutions, and for patients in whom a liability to the disease has become established.

Arsenicum.—Severe forms of quinsy, attended with great general *prostration*, the tonsils assuming a putrid or gangrenous character.

Rhus Tox.—If the febrile symptoms assume a typhoid character, this remedy may be administered alternately with *Ars.* or *Bell*.

Nux Vomica or *Pulsatilla*, as may be best indicated by the condition of the patient, is often useful when derangement of the stomach appears to be the cause of the complaint, or is evidently associated with it.

Administration.—In acute cases, a dose every one or two hours, till some improvement ensues; in subacute, every three or four hours; during convalescence, every six or twelve hours. If swallowing is extremely difficult or impossible, one or two drops of the tincture on about two grains of sugar of milk, and placed dry on the tongue.

ACCESSORY MEANS.—The most effectual local application is the *steam of hot water*, and equally so whether the object be to bring about resolution or to facilitate the suppurative process. Steaming the throat assiduously with the steam of hot water, acts as a fomentation, and removes the mucus from the crypts and follicles of the tonsils. In order to carry out this suggestion efficiently, an *Inhaler* is necessary; a very useful one may be procured for about 2s. 6d.; and considering the utility of such an apparatus for general throat affections, coughs with copious expectoration, etc., so small a sum may thus be well expended. For the sake of the poor, or in emergencies, the following will be found a good substitute for an inhaler. Pour boiling water into a teapot, up to the bottom of, but not sufficient to cover, the aperture which conducts to the spout, and with the lid of the teapot closed, draw up the steam into the throat. This may be repeated half a dozen times a day, or oftener, as long as the throat continues painful.

In some cases a warm milk-and-water gargle, frequently used, will be found useful and soothing. Further, in severe attacks, a hot poultice should be applied across the throat, extending nearly to each ear; in mild attacks, the wet compress, described pages 133-4, may be used. The patient should remain indoors, and in bad cases, in bed.

PREVENTIVE TREATMENT.—Freely bathing the neck, jaws, etc., and gargling the mouth and throat every morning with cold water. After exposure to cold, and especially if the first symptoms of sore throat show themselves, the wet compress, covered with oiled-silk and flannel, as recommended in the last paragraph, should be at once applied.

11.—Mumps (*Parotitis—Cynanche Parotidæ*).

Mumps may be classed among the epidemic diseases; for when it affects one person in a family or school, it usually extends to others. It is much more prone to attack children than adults, and seldom occurs in the same person more than once.

METASTASIS.—A curious but important circumstance connected with this affection is, that in many cases, as the swelling of the neck and throat subsides, the *testicles* in the male, and the *mammæ* in the female, become tender and swollen. Occasionally, but more rarely, the metastasis is from the neck and throat to the brain, and then it becomes a very serious disease.

The transference of the disease from the part first implicated to the testicle, mamma, or brain, is much more likely to supervene when the tumefaction *suddenly* subsides, as on exposure to cold, or from cold applications.

CAUSES.—A specific morbid miasm, generated during peculiar conditions of the atmosphere, which spreads by contagion. Cold and damp are especially favourable to its appearance.

SYMPTOMS.—Swelling and soreness in one or both parotid regions, preceded by febrile symptoms. The swelling generally extends from the ears to the glands under the jaw and chin, and the parts are hot and tender. Sometimes one side, and sometimes both sides, are affected; and there is often considerable deformity, with difficulty and pain in moving the jaws. On or about the fourth day, in favourable cases, the inflammation and swelling have reached their height, and by about the eighth or tenth day all traces of the complaint have disappeared.

TREATMENT.—*Mercurius* is the chief remedy, and is often sufficient to effect a cure, especially when caused by cold, and attended with pain during mastication, and impaired appetite. A dose two or three times daily. As in quinsy, the *Iodide of Mercury* is the most efficacious preparation.

Belladonna, when the pain is very severe, with a tendency to lethargy and delirium; when the inflammation becomes erysipelatous, and when the mumps occur after measles.

Aconitum.—If there is much fever present; two or three doses may precede any other remedy.

Metastasis, with inflammation and suppuration.—*Merc.*, *Puls.*, *Sil.*, *Coni.*, or *Aur.*

Sudden occurrence of delirium or coma.—*Bell.*, *Opi.*, or other cerebral remedies.

ACCESSORY MEASURES.—It is highly important, as may be inferred from what has already been remarked, that there should be no exposure of the patient to cold or damp during the progress of the disease. Cold local applications, to reduce the swelling, are quite inadmissible, and if used would favour the tendency to metastasis of this disease to more important organs. Warm fomentations are beneficial, the parts being covered in the intervals with one or two thicknesses of flannel roller. In mild cases, a flannel roller is the only local application necessary.

Quinsy generally terminates by resolution; but should suppuration ensue, poultices must be substituted for fomentations.

Lastly, mental and physical excitement are to be avoided, so as further to guard against troublesome metastasis.

12.—Goitre—Derbyshire Neck (*Bronchocele*).

DEFINITION.—This consists of a chronic morbid enlargement of the thyroid gland, from the use of water containing in solution the salts of lime.

The swelling is unattended with pain or danger, until it acquires a size sufficient to produce deformity, and, by its pressure upon the trachea and cesophagus, interfere with respiration and swallowing. Women are more subject to it than men, the proportion being about twelve to one; and the right lobe is more often enlarged than the left. It is most commonly met with in chalky districts and mountainous countries, and in the latter is often associated with cretinism.*

CAUSES.—This is called an *endemic* disease, because it is prevalent in particular localities, such as Derbyshire (hence called *Derbyshire neck*), and the chalky parts of England generally, and various Alpine and mountainous districts of

* Cretinism is a strange disease, a sort of idiocy, accompanied by deformity of the bodily organs, which has a close but ill-understood connection with goitre. Most cretins are goitrous; but the latter may exist without the former. The cretin is found principally in the valleys of the Alps, the Pyrenees, and the Himalaya mountains. Idiotism of the lowest grade is often his lot; sometimes he is deaf and dumb, or blind; and in short, if neglected, he more resembles an animal than a human being. I say, if neglected, for the humane Dr. Guggenbühl has proved, that by pure mountain air, exercise, a nourishing diet, into which milk largely enters, and moral and mental training, much may be done for these apparently hopelessly-wretched beings (*Tanner*).

As this chapter is passing through the press, the author regrets to learn from a correspondent and visitor to the sanitary establishment founded some years since for cretins by Dr. Guggenbühl, that this valuable institution is now changed into the Hotel Bellevue and Pension. The Doctor has died and the children are dispersed to their homes.

Switzerland and other countries. It is due to some specific action of the drinking water which flows from rocks of magnesian limestone. Chemical examination of the water used by the inhabitants of the various places where goitre prevails, always finds in it large quantities of carbonate of lime; whereas the water from clay-slate rock, drunk by the inhabitants who did not suffer from goitre, contained none. In Yorkshire, Derbyshire, Nottinghamshire, Hants, and Sussex, where the disease prevails, there is a ridge of magnesian limestone running from north to south through the centre of the district. All along that line goitre prevails to its greatest extent; and, diverging to either side, the disease is found to diminish (*Inglis*). In a goitrous district in Switzerland, there are some waters issuing from certain rocks, and trickling along crevices in the mountains, the drinking of which will produce *goitre*, or increase goitrous swellings, in eight or ten days; while the inhabitants who avoid these waters are free from the disease. In Oude, where goitre affects animals as well as man, it is stated that the water of wells known to be injurious, in consequence of their excessive impregnation with lime, has been abandoned, and other water substituted for drinking; great benefit has resulted, and goitres have diminished in size, even though the subjects of them have continued living in the same village as before. Most persons who have goitre find it enlarge during any derangement of the general health, especially from uterine ailments, difficult labours, an anæmic condition of the system, and also strains, twists of the neck, etc.

TREATMENT.—*Spongia*.—This is an excellent remedy for reducing the swelling, and may be administered night and morning for a week; then, after pausing a few days, the course may be repeated as often as it proves beneficial.

Mercurius Iodatus.—In cases of long standing, and when

the tumour is enlarging so as to impede the function of breathing, we have used this remedy with excellent results.

Bromine, Calc. Carb., Caust., Kali Hydriod, Iod., Staph., and Sulph., are additional remedies, from which a selection may sometimes be made; but *Spong. or Merc. Iod.* is the first to be used. We have sometimes conjoined external applications of the same drug as has been given internally with good results.

An entire removal of the swelling is not always possible; still, much is gained if the tumour is lessened, or its further enlargement prevented. Any impairment of the digestive or uterine functions should, if possible, be corrected, for, as before stated, under such disorders a *bronchocele* is much more likely to attain inconvenient and even alarming proportions.

AUXILIARY MEASURES.—One most essential point in the treatment is the removal of the patient from the district where the infection occurs. The necessity of this may be inferred from the fact that persons taking up their residence in affected localities soon acquire goitre, while others who leave such localities, affected with goitre, soon lose it. A dwelling on the coast, and sea-bathing, are advantageous, and under such circumstances the remedies prescribed may be employed with much greater hope of success.

Water used for domestic purposes should first be boiled or distilled. Next to removal from a goitrous locality, this is the most essential point in the treatment and cure of bronchocele.

CHAPTER XII.

DISEASES OF THE ORGANS OF CIRCULATION.

1.—Palpitation of the Heart (*Palpitatio cordis*).

IN a perfectly healthy condition, we are scarcely sensible of the heart's action; when, however, its pulsations become much increased in force or frequency, or both, the unpleasant sensation known as "palpitation" is experienced.

In the following Table, abridged from Dr. Aitken's "Science and Practice of Medicine," the chief characters of palpitation from structural disease of the heart, are placed in contrast with those from mere functional disorder.

TABLE OF THE CHIEF DIFFERENCES BETWEEN ORGANIC
AND FUNCTIONAL DISEASE OF THE HEART.

| ORGANIC DISEASE. | FUNCTIONAL DISEASE. |
|--|--|
| 1. Palpitation usually comes on slowly and <i>insidiously</i> . | 1. Palpitation generally sets in <i>suddenly</i> . |
| 2. Palpitation, or distressed action, though more marked at one time than another, is <i>constant</i> . | 2. Palpitation is <i>not constant</i> , having perfect intermissions. |
| 3. Percussion elicits <i>increased extent</i> and degree of <i>dulness</i> in the region of the heart. | 3. Dulness in the region of the heart is <i>not extended</i> beyond the natural limits. |
| 4. <i>Lividity</i> of the lips and cheeks, congested countenance, and anasarca of the lower extremities, are often present. | 4. There is <i>no lividity</i> of the lips and cheeks, countenance often chlorotic, and, except in extreme cases, no anasarca. |
| 5. Palpitation often <i>not much complained of</i> by the patient, but occasionally attended with <i>severe pain extending to the left shoulder and arm</i> . (See "Angina Pectoris.") | 5. Palpitation <i>much complained of</i> by the patient, often with <i>pain in the left side</i> . |
| 6. Palpitation is <i>increased by exercise</i> , stimulants and tonics, but is relieved by rest. | 6. Palpitation is increased by <i>sedentary occupations</i> , but <i>relieved by moderate exercise</i> . |
| 7. Is more common in the <i>male</i> than the female. | 7. Is more common in the <i>female</i> than the male. |

PALPITATION AND DISEASE OF THE HEART.—We infer palpitation to be the consequence of functional disorder, as of indigestion, when it occurs only occasionally, and when the action of the heart is uniform during the intervals. In medical practice the fact is often observed, that patients with serious organic disease of the heart, rarely suspect any thing radically wrong until the disease has made considerable advances; while patients with mere functional disorder of that organ frequently entertain the gravest apprehensions. Most cases of palpitation are from functional disorder and not from structural disease, and are consequently quite curable. Sometimes, from nervous irritability, some of the great arteries, particularly the abdominal aorta, takes on an inordinate action, which might be mistaken for aneurism.

CAUSES.—The *predisposing* are, a nervous temperament; hysteria; a full habit, and diseases of the heart. The *exciting* causes are, excessive joy, grief, fear, and other mental emotions; severe or prolonged exertions; profuse discharges from the body; menstrual derangements; disorders of the stomach, etc. *The excessive use of tea* has been known to give rise to palpitation and other irregularities of the heart's action; in such cases, the symptoms can only be expected to cease on discontinuing that beverage.

TREATMENT.—The subjoined has reference to the treatment of simple palpitation, unconnected with any organic disease of the heart.

Remedies.—Acon., Spig., Verat., Cactus Grand, Aur., Bell., Ars., Phos., etc.

Aconitum.—Palpitation from the least excitement, with anxiety, chilliness, numbness of the extremities, or a sensation as if the heart ceased to beat; short and hurried breathing; *hot and flushed face*. It is specially adapted to patients of a *plethoric habit*. *Dose.*—During a sudden and severe paroxysm, a dose every half-hour or hour, until relieved.

Belladonna.—Oppression, tremor, pain about the heart; palpitation extending to the *neck and head*.

Spigelia.—Palpitation with strong pulsations of the heart, sometimes so as to be heard and seen through the clothes; pain; tremulous motion of the heart.

Digitalis.—Irregular action of the heart, the pulsations being violent at one time and scarcely felt at another; contractive, spasmodic pains with anguish in the region of the heart.

Ignatia.—Palpitation caused by long-continued, *silent grief*.

Coffæa.—*Wakefulness* and nervous restlessness; palpitation from *sudden joy*.

Chamomilla.—Palpitation from *passion*.

Opium.—Palpitation caused by a *fright*.

Veratrum.—Palpitation from *fear*.

Pulsatilla.—Hysterical symptoms, and in females suffering from deranged period.

Administration.—During a sudden attack, a dose should be administered immediately and repeated every thirty to sixty minutes; as the symptoms decline, or in mild cases, every three, six, or twelve hours.

ACCESSORY MEASURES.—In severely-painful affections of the heart, the application of a large hot bran-poultice over the region of the heart for about fifteen minutes at bed-time, will relieve the distressing sensations. See the next section. The patient must avoid excessive physical exertion, mental excitement, stimulants, coffee, sleeping draughts, etc. Pure air; cold water, used internally and externally; regular exercise in the open air, short of inducing fatigue; a contented and tranquil disposition, with light and nourishing diet, are excellent auxiliaries in the treatment of this affection.

2.—Angina Pectoris—Breast-Pang.

DEFINITION.—Sudden, severe paroxysms of pain, or spasm of an enfeebled or diseased heart, with a constricted, burning sensation, intense anxiety, and dread of immediate death, chiefly occurring in elderly persons, or past the middle period of life.

SYMPTOMS.—The patient is seized with a sudden dreadful pain, which centres in the heart, and extends over more or less of the anterior portion of the chest, up the shoulder in the line of the costo-humeral nerves, and down the arm. There is an agonizing feeling of anxiety, faintness, fear of instant death, palpitation and dyspnœa, so that if walking he is compelled to stop and to fix on the first object that offers support, and so remains dreadfully pale and covered with a clammy perspiration. The paroxysms may terminate in a few minutes, or last for hours, and are liable to recur with increased severity, till at length one proves fatal.

CAUSES.—Generally, *organic disease of the heart*, as valvular disease, fatty degeneration, or ossification, thickening, or obstruction of the coronary arteries, in consequence of which the muscular fibres of the heart are impaired. Under such conditions a paroxysm is brought on by over-exertion, mental excitement,* indigestion with flatulent distension of the stomach, and, after repeated attacks, even a frightful dream.

TREATMENT.—The most useful remedies are,—*Acon.*, *Dig.*, *Verat.*, *Arsen.*, *Samb.*, etc.

Aconitum.—Recent cases, and for plethoric patients.
Digitalis.—Cases in an advanced stage, the paroxysms

* John Hunter, the celebrated surgeon, suffered greatly from this disease; he considered his life in the hands of any person or circumstance which acted powerfully on his mind, and at last died in St. George's Hospital, from strong but suppressed feelings on a point in which he was interested.

recurring frequently and suddenly. *Veratrum*.—Slow, intermittent pulse, cold extremities, cold perspirations. *Arsenicum*.—Extreme dyspnœa, increased by the slightest movement, marked debility, pale and haggard face, feeble and irregular pulse, and dread of immediate death. *Sambucus*.—Violent dyspnœa, awaking from sleep with a suffocative sensation, and dreadful anguish about the heart. *Nux Vomica*.—Indigestion, the attacks being attended or followed by flatulence.

ACCESSORY TREATMENT.—Brandy or some other diffusible stimulant, in frequent small doses ; a large hot bran poultice over the region of the heart, and warmth to the extremities.

3.—Anæmia.

DEFINITION.—This is a morbid condition, often called “poverty of blood,” in which the composition of the blood differs from the normal standard ; the *liquor sanguinis* being watery, the albumen poor, and the red blood-corpuscles, which give to this fluid its characteristic colour, deficient.

SYMPTOMS.—The skin, the lips, and the mucous membrane generally, are pallid and have a bloodless appearance, and the face looks like wax ; the lining of the gums and mouth is white, and the tongue is large, flabby, and pale ; the pulse is feeble, thready, beats about 80 times in a minute, and is easily excited. The patient becomes very *weak* and languid, is easily fatigued and loses breath ; there is indigestion, loss of appetite, flatulence, and irregular action of the bowels ; the temperature of the extremities and surface generally is below the healthy standard, and there is, generally, œdema of the ankles or even of the feet. There is also dejection of spirits, and morbidly heightened nervous sensibilities.

CAUSES.—Copious or frequent small discharges of blood,

as in hæmorrhoids, repeated discharges of blood from the womb, venesection, etc. Profuse or prolonged evacuation of fluids which contain much of the organic constituents of the blood, also gives rise to this condition, as in diarrhœa, dysentery, ague, etc. Insufficiency of proper nutriment to replenish the blood, or disturbances in the assimilative functions. Lastly, anæmia may result from the mind or body being overtaxed, or from acute or chronic disease, especially phthisis, diabetes, cancer, etc. Under such circumstances, the blood becomes scanty or watery, the common saying being almost literally true—"The blood is turned into water."

TREATMENT.—Anæmia from loss of animal fluids (blood, etc.)—*Chin.*, *Phos. Ac.*, *Nux V.*, *Verat.*

From severe diseases.—*Calc. Carb.*, *Ars.*, *Ferr.*, *Phos.*, *Carb. Veg.*, *Sep.*, *Sil.*, etc.

ACCESSORY MEANS.—Nourishing, digestible diet, in quantities as large as can be assimilated—milk, eggs, animal broths, and afterwards, fish, poultry, game, mutton, etc. Combined with suitable food, moderate daily out-of-door exercise in a pure air, and bathing, especially sea-bathing, are necessary to the restoration of the patient.

4.—Aneurism.

This disease consists of a tumour communicating with an artery containing blood. In its first stage, it contains fluid blood, and pulsates; in its second stage, it contains coagulated blood, deposited in numerous thin layers, like the leaves of a book. It is of two kinds: the *idiopathic*, arising from disease of the coats of an artery; the *traumatic*, from the wound of an artery. Aneurisms are more common in men than women, and are the cause of death in England, *annually*, of 300 to 400 persons.

5.—Varicose Veins (*Varix*).

This condition is one in which the veins are so dilated that their valves, which do not undergo a corresponding enlargement, are no longer efficient. It occurs most frequently in the superficial veins of the lower extremities, and not usually in the deep-seated veins, because they are supported by the muscles and *fasciæ*. When this condition occurs in the veins of the spermatic cord, it is called *Varicocele*; when in the veins of the anus, it constitutes a form of *piles*.

SYMPTOMS.—The affected veins are tortuous, dilated, knotted, of a dull leaden or purplish blue colour, with much discoloration of the parts, and some œdema of the limb. If a great many small cutaneous veins are alone affected, they present the appearance of a close network of blue veins under the skin. After taking the horizontal position, the enlarged veins and the local swelling diminish.

CONSEQUENCES.—(1) Severe aching pain, with a sense of weight and fatigue, especially after long walking, or remaining for some time standing in one position. (2) The vein may burst by injury, and occasion severe and dangerous hæmorrhage. (3) Ulcers may arise from the imperfect circulation and nutrition of the skin, usually on the lower part of the outside of the leg. (See the next section.) (4) They incapacitate for hard or long-continued work, being associated with constitutional debility.

CAUSES.—The cause of *varix* may be generally stated to include such conditions as induce more or less permanent distension of the veins. Thus strains, or over-exertion of a part, may cause such an afflux of blood into the veins as to lead to their distension; so also standing occupations favour the gravitation of blood to the lower extremities; and, further, the length of a vein, such as the *internal saphenous vein*, may lead to its undue distension in consequence of the

long column of blood it contains. Obstacles to the return of venous blood, such as tight garters or stays, a tumour, the pregnant uterus,* or even impacted fæces, pressing upon one of the large venous trunks, may occasion its permanent distension as well as that of its branches. In other instances, varix seems to be due to an hereditary predisposition, constitutional debility, deficiency of tone in the active organs of circulation, or to an enfeebled and relaxed condition of the walls of the veins.

TREATMENT.—*Hamamelis*, administered internally, and applied as a lotion externally, by means of a compress, and well covered with oiled-silk, is often specific. See “*Lady’s Manual*,” pages 93–4.

Pulsatilla.—Swelling of the veins and of the entire limb, with pain and inflammation; the parts presenting a bluish appearance. This remedy may be administered every four or six hours. Sometimes its use should be preceded by a few doses of *Arnica*, particularly if fatigue or injury has led to the varix.

Nux Vomica.—This may be substituted for *Puls.* when the varix is attended with constipation, piles, or an irritable disposition.

Arsenicum.—In addition to the symptoms just mentioned, there is severe *burning* or stinging pain, and an enfeebled condition of the constitution.

Carbo Veg.—The symptoms resemble those of *Arsenicum*; the former may be used when the latter has been but partially successful.

Lycopodium.—Chronic cases, and after other remedies have failed.

Aconitum or *Belladonna*.—Very painful inflammatory symptoms, local or general.

* For the treatment of this common affection during pregnancy, see “*The Lady’s Manual of Homœopathic Treatment*.”

ACCESSORY MEANS.—Moderate compression by bandages and laced-stockings, so as to afford that support to the blood which the valves can no longer give, and to prevent an increased distension. The pressure should be very gentle and uniform, and be applied in the morning, before the patient puts his feet to the ground, and maintained until he retires to bed. Should only a small portion of a vein be enlarged, a piece of strapping plaster, well applied, may afford the requisite support. Prolonged exercise or standing should be abstained from, and, after taking moderate exercise, the limb should be raised, and maintained in a horizontal posture. Standing is more unfavourable than walking. The leg should be well washed, and rubbed quite dry every day.

6.—Varicose Ulcers.

Their treatment is precisely the same as that of “Ulcers” generally, and is sufficiently pointed out in the article on that subject, with the exception of the following directions: Should a varix burst, excessive hæmorrhage may suddenly take place, inducing fainting, or even death. The treatment is immediately to place the patient flat on the floor, and raise the leg, when the hæmorrhage generally ceases. A compress and bandage should then be applied to prevent subsequent bleeding. Excoriations or tender spots about varicose veins should have appropriate attention, to obviate the formation of ulcers.

CHAPTER XIII.

AFFECTIONS OF THE SKIN—CUTANEOUS DISEASES.

1.—Itching or Irritation of the Skin (*Prurigo*).

THIS condition consists of an eruption on various parts of the body, sometimes nearly imperceptible, which occasions the itching. It is important to note that this condition is frequently but the external manifestation of chronic disease of the skin, or of some internal organs; and that these are much more serious than the sensations thus occasioned. In some instances, however, *prurigo* seems to exist as an independent affection.

SYMPTOMS.—Similar to, but much severer than, urticaria, so that patients scratch and tear themselves till the blood flows; their sleep is frequently disturbed, and their existence is often almost unendurable; or the impulse to incessant scratching is so powerful as to induce the patient to seek seclusion. Sometimes the itching is diffused irregularly over the surface; at other times it affects the extremities; frequently it occurs round the anus, or on the scrotum, or on the female genitals. It is often a horrible and most obstinate disease.

CAUSES.—The *predisposing* are, constitutional taint, chronic disease, etc. *Exciting* causes are, rich, indigestible food, stimulating drinks, extreme heat or cold, etc.

TREATMENT.—*Aconitum*.—Furious itching all over the skin, with febrile symptoms, especially towards night or when getting warm in bed.

Sulphur.—Severe itching, attended with thirst, dryness of the skin, and worse in the evening and in bed. This is *generally* a prominent remedy, and it is frequently specific.

Carbo Veg.—Obstinate cases, and when *Sulph.* only partially cures.

Rhus Tox.—Itching with swelling and redness of the affected parts.

Arsenicum.—Itching with burning or an eruption emitting watery-fluid like sweat, and attended with much constitutional weakness.

Mercurius.—Itching occurring day and night, but worse in the evening; also when the parts bleed easily after scratching.

Ignatia.—Itching of the skin of a fine, pricking character, resembling flea-bites, and changing from one part to another.

Other remedies are sometimes required:—*Calc. Carb.*, *Conium*, *Puls.*, *Hepar Sulph.*, or *Sepia*.

ACCESSORY MEANS.—The skin must be strengthened by wholesome and regular diet, frequent exercise in a bracing air, and daily ablutions with cold or tepid water, sponging, shower baths, etc. Without these measures medicine will be of little permanent use. Stimulating food or drink, pastry, rich sauces, pickles, and indigestible food generally, must be avoided. The external application of ointments is highly injurious. In severe cases, temporary relief may be obtained by bathing the parts with alcohol and water, in equal proportions, or by sponging the skin, on retiring to bed, with a warm infusion made by pouring boiling water on bran. *The Wet Compress.*—Prurigo, if confined to one or two places is much benefitted by the constant use of a wet compress over the affected part; for although it often increases the irritation at first, it finally assists nature in expelling the morbid matter.

2.—Itch (*Scabies*).

SYMPTOMS.—A vesicular eruption, presenting numerous watery conical pimples, attended with itching, often very violent, and aggravated by scratching. The violence of the

symptoms, however, depends on the number of the *acari* present, the length of time the patient has been affected, and the degree of sensibility of the patient's skin. The disease may occur on any part of the body, but the *acari* generally prefer delicate parts of the skin, such as the thin skin in the flexures of the joints, especially the wrists and between the fingers.

CAUSE.—The burrowing in the skin of the female *acarus scabiei*, for the purpose of depositing her eggs. The canal formed for this purpose is between the layers of the epidermis of the human skin, about a line from each vesicle, and varies in length from half a line to three or more lines. After forming the canal, the female cannot return, owing to the spinous processes which project backwards; and when she has deposited her eggs, which she does at the rate of one a day till fourteen are laid, she dies.

TREATMENT.—Nothing perhaps is more effective than the free application of *Sulphur ointment*, or *Sulphur baths*, by which the insect may be destroyed. After thoroughly rubbing the whole body with soft soap and water, and afterwards washing in a hot bath, or with hot water, the ointment should be well rubbed in and allowed to remain on the body all night. On the following morning a tepid bath, using yellow soap, to wash off the ointment left on overnight, completes the cure. If the application of the ointment and the ablutions have not been thoroughly made, the processes should be repeated once or twice. At the same time the internal use of *Sulphur* in pilules or tincture, night and morning for two or three days, is recommended. All contaminated washing clothes should be put into boiling water; other garments should be well ironed with a hot iron, or exposed to hot air at a temperature not less than 150° or 180° Fahr., or well fumigated with the vapour of *sulphur*.

3.—Nettle Rash (*Urticaria*).

SYMPTOMS.—Similar or more intense than those produced by nettle stings, *Urtica* being the Latin for a nettle. The eruption consists of white elevations, occurring in streaks or wheals of an irregular shape on a red ground; the character of the rash becomes much more marked after scratching or rubbing, and is generally worse in the evening, and when the body is exposed to cold air. There is much smarting and itching, and often the eruption, after disappearing suddenly from one part, shows itself in another. The spots contain no fluid, and end in desquamation of the skin. It is not contagious, and may occur in the same person repeatedly.

CAUSES.—Derangements of the digestive organs, following the use of some particular kinds of food, among which we may specify bitter almonds, cucumbers, mushrooms, oatmeal; shell-fish are a common cause of nettle-rash, especially mussels; also certain kinds of medicines, such as cubebs, copaiba, etc. Chronic and intermittent urticaria is often associated with uterine or other diseases. Cold, rapid changes of temperature, and, in children, teething, favour its development, especially in patients predisposed.

TREATMENT.—*Acon.*, *Rhus Tox.*, *Puls.*, *Bell.*, *Merc.*, *Calc.*, *Bry.*, *Ars.*, *Nit. Acid*, *Nux V.*, *Sulph.*

Aconitum, thrice daily, when the rash is attended with febrile symptoms.

Dulcamara.—Nettle rash from exposure to wet or during damp weather, with a severe stinging sensation, restlessness, pain in the limbs, diarrhoea, dark urine, etc.

Rhus Tox.—In the more severe forms of the disease; also when it has been caused by eating prawns, crabs, mussels, etc.

Nux Vomica.—Urticaria from indigestion or intoxicating beverages, and when the bowels are confined.

Pulsatilla.—If the complaint follows the use of *fat food*, with *relaxed bowels*, distended stomach, and loss of appetite.

Calcaria.—Chronic nettle rash, especially in scrofulous or cachectic constitutions. It is often necessary to continue the use of this remedy, for one or two weeks, administering a dose morning and night.

Ipecacuanha.—In nettle rash accompanied by dyspnœa, oppression at the chest, or vomiting.

Bryonia.—If the eruption *suddenly* disappears without an improvement in the other symptoms, or with an aggravation of them; a dose frequently, till the eruption re-appears.

GENERAL TREATMENT.—Smearing with bacon fat, as recommended page 114, gives great relief. Also dusting the skin with powdered starch or fine flour. The patient should enjoy a dry, uniform, and moderate temperature; have plain food; take plenty of exercise in the open air; and observe great cleanliness. In this, as in all cutaneous diseases, the eruption should be retained upon the surface, to prevent the disease developing itself internally.

4.—Ringworm (*Herpes circinnatus*).

SYMPTOMS.—Small round vesicles, filled with clear or yellow fluid, mostly on the head, at the roots of the hair, and varying in size from a shilling to that of a crown-piece. The patches gradually enlarge; the hair upon them changes its colour; as the disease progresses, the hair perishes at the roots, falling with the scabs, leaving irregular patches of baldness. In chronic cases the whole scalp becomes affected.

CAUSES.—Neglect of cleanliness; a scrofulous constitution; an emaciated and feeble condition, especially in children not supplied with good food and plenty of exercise in the open air, or who live in filthy, ill-ventilated, dark dwellings. The most frequent *immediate* cause is *contagion*; thus it may *be transmitted* by combs, brushes, caps, towels, or anything

which has been in contact with the head of an affected child.

TREATMENT.—*Sepia* is considered a specific in a majority of cases, and should be administered thrice daily for several days; if it does good, it should be continued at longer intervals for a week or ten days; but should the disease extend, and other rings make their appearance, the next remedy should be tried.

Rhus Tox. is indicated when the skin is red-looking, and the eruption irritable, and especially if a greenish-pus is secreted, and there is nocturnal itching.

Hepar Sulphur.—When the complaint is not limited to the head, but extends to the face and neck, and has a foetid smell; and when it is attended by affections of the eyes and ears. In slight forms of the eruption, and if used early, this remedy will often effect a cure.

Sulphur.—When the eruption is obstinate, or when fresh places break out, with much smarting and itching. A dose thrice daily, for two or three days; afterwards, once or twice a day, for a week or ten days.

Calcareo, *Lycopodium*, *Mercurius*, or *Phosphorus* may be required, the indications for which will be found in the *Materia Medica*.

GENERAL TREATMENT.—Cleanliness is of great importance. Cut the hair short with fine-pointed scissors, and wash the head with tepid water, using a little mild soap. The hair and *head* should be frequently well brushed, so as to excite the vital action of the skin. An occasional tepid bath will facilitate recovery. A plain but nutritious diet is necessary, avoiding the use of salted meats. Scrofulous, emaciated children will be benefitted by a teaspoonful of good *cod-liver oil*, which may be taken twice a day for several weeks; also by *change of air*. Sudden and extreme variations of temperature should be guarded against. Popular remedies, as *ink*, *tobacco-water*, etc., are dangerous.

5.—Scald Head (*Tinea Capitis*—*Favus*).

SYMPTOMS.—A pustular chronic eruption, chiefly upon the hairy scalp, but sometimes on the face, neck, or limbs. At first small red pustules appear, and afterwards suppurate, the matter from which hardens into yellow scabs, which itch excessively. The discharge is very irritating, so as to lead to ulceration of contiguous portions of the skin. It is an obstinate complaint, lasting for months or even years. Under homœopathic treatment, however, the cure is comparatively rapid.

CAUSES.—See under “Ringworm,” the causes being identical.

TREATMENT.—*Rhus Tox.*, *Arsen.*, *Merc.*, *Lyc.*, *Dulc.*, *Graph.*, *Staph.*, and *Sulph.* For the indications, see the previous section and the *Materia Medica*.

ACCESSORY TREATMENT.—Strict cleanliness is essential. The head should be kept very clean by washing with warm water and mild soap, and the hair cut close to the scalp, or pulled out by suitable forceps. The scabs should not be forcibly removed, nor the head covered with oiled-skin caps. The patient should be much in the open air, if possible on the sea-coast, or in the country.

6.—Loss of Hair—Baldness (*Alopecia*).

CAUSES.—Defective nutrition of the hair follicles, and dryness of the scalp, resulting from a languid condition of the capillary circulation, by which the hairs are exclusively nourished. A defective supply of blood in advancing age, from imperfect capillary circulation, may also be assigned, in many cases, change in the colour of the hair. That deficient vascularity is a cause of baldness is evident from the fact that persons prematurely bald are almost uniformly found to have a languid circulation. At other times, loss of

hair follows a severe disease, such as typhus or typhoid fever, inflammation of the brain, etc. Baldness likewise occurs in persons who are otherwise quite healthy; in such cases a medical man should be consulted. A modern physiological author attributes the more frequent baldness among the male as compared with the female sex, to the heat and compression from the hats that are usually worn. The following causes and remedies may be considered.

1. *Loss of hair from debilitating causes*:—China, Ferrum.
2. *After severe inflammatory disease*:—Calc., Hep. Sulph., Silic.
3. *From frequent attacks of headache*:—Phos., Nit. Ac., Sep.
4. *From excessive use of Mercury*:—Carb. V., Hep. Sulph.
5. *After excessive grief or trouble*:—Ign., Phos. Ac., Staph.
6. For recent baldness, and in cases where the hair begins to fall off in early life, or from hæmorrhages, syphilis, etc., *Cantharadine Pomade*, prepared of a strength proportionate to the effect which it is desirable to produce, should be applied externally. At the same time, a dose of *Cantharis* may be taken internally, night and morning, for a few days. After waiting a short time, if necessary the remedy may be repeated.

ACCESSORY MEANS.—The head should be kept very clean by frequent bathing with cold water; and the hair and scalp be thoroughly brushed several times a day, so as to excite the vital action of the skin, and stimulate the hair bulbs by friction.

7.—Dandriff (*Pityriasis*).

DEFINITION.—This is a chronic inflammatory affection of the skin, attended with itching, slight redness, and by the production of minute white scales in large quantity.

TREATMENT.—When scurf forms on the head and comes

off in small scales, and when there is headache or itching of the scalp, a dose of *Lycopodium*, night and morning for a week, will probably do good. This remedy may, if necessary, after a few days, be repeated, or one of the following may be substituted:—*Graph.*, *Calc.*, *Staph.*, *Sulph.*

ACCESSORY MEANS.—Strict attention to cleanliness. The hair should be cut off close to the scalp. If there is much irritation, the application of glycerine, diluted with water, is very useful.

8.—Pimples (*Papules*).

DEFINITION.—Pimples are minute hard elevations of the skin, chiefly of the forehead and face, which are generally absorbed, or disappear in small bran-like desquamation; occasionally they lead to ulceration.

CAUSES.—Excessive or too rich food; the use of stimulants; too little recreation or out-of-door exercise. Weak digestion is a predisposing cause.

TREATMENT.—*Arn.*, *Hep. Sulph.*, *Sep.*, *Puls.*, *Ant. Crud.*, *Merc.*, *Nux V.*, *Sulph.*, *Acon.*

Arnica.—Pimples or small boils, especially about the forehead and face, with inflammatory symptoms, or a bruised sensation of the parts.

Hepar Sulph.—Chronic pimply eruptions; especially suited to patients of unhealthy skin.

Ant. Crudum.—Pustular pimples; white blotches with red areola. It is chiefly indicated when the derangements in the digestive and nutritive functions correspond with this remedy. See “*Materia Medica.*”

Mercurius.—Small itching pimples upon the face or nose, with redness and swelling, especially of a catarrhal or syphilitic origin.

Sulphur.—For obstinate eruptions, and as an intercurrent remedy.

ACCESSORY MEANS.—The diet should be wholesome and nourishing, and taken at suitable intervals. Regular out-of-door exercise, and an occasional warm bath in the evening for cleansing the skin, and a cold bath or cold sponging in the morning for tonic purposes, are necessary for correcting that condition of body which favours the growth of pimples. The “Accessory Treatment” prescribed in the section on “Indigestion” may be consulted with great advantage.

9.—Abscess.

DEFINITION.—An abscess is a collection of matter, resulting from diseased action, formed within a sac or cyst of organized lymph, and supplied with absorbent and secreting vessels.

The frequency of its occurrence, the importance of the parts it may involve, and the injury it may occasion, especially if deeply-seated, by bursting into serous cavities or mucous canals, seem to demand special consideration.

SYMPTOMS.—*Acute abscess* commences with the ordinary signs of inflammation, namely, inflammatory fever, throbbing pain, bright redness, and swelling; these symptoms are soon followed by suppuration, which is marked by an alteration in the colour of the skin, and a change in the character of the pain. The skin loses its bright arterial colour and becomes livid, and the pain is less severe, now more resembling a sense of weight and tension. The swelling becomes softer, and, as the matter forms, its centre begins to point, and fluctuation can be detected by pressure with the fingers. “After this, the parts between the abscess and the surface become successively softened and disintegrated. The tumour becomes more and more prominent; the centre exhibits a dusky-red or bluish tint, the cutis ulcerates, the cuticle bursts, and the pus escapes. But where pus is formed under dense fasciæ, or deep in the breast or pelvis, and cannot quickly make its way to the

surface, the pain is not relieved but much aggravated by the increase of distension; and the constitutional fever and chills are much more intense" (*Druitt*).

CHRONIC ABSCESS first appears as an indistinct tumour, the fluctuation being more or less marked according to the distance from the surface. The inflammatory symptoms of the acute variety are altogether absent, unless far advanced, or accidentally irritated.

CAUSES.—Abscesses, with few exceptions, are indicative of constitutional debility, and are a frequent sequel of low exhausting fevers. In proof of abscess being a sign of debility, we may refer to the

MAMMARY ABSCESS, which occurs after parturition, chiefly in ill-fed and poorly-nourished women; more frequently after giving birth to twins than to single children, and in women after protracted labours, or after profuse flooding. Mammary abscess is rarely met with in strong healthy women, of vigorous circulation.

Abscesses may, however, result from blows, or from foreign bodies introduced into the skin or flesh, such as splinters, thorns, etc.

TREATMENT.—*Hepar Sulphur*.—This remedy is often serviceable in promoting the suppurative process in acute abscesses, and may be administered every four hours for a day or two, and afterwards every six hours, during suppuration. At the same time local measures should be adopted, as pointed out further on.

Silicea.—If the discharge is tardy and continue for a long period, this remedy may be substituted for, and administered in the same manner as, *Hepar Sulph*.

Mercurius.—Painful abscess, attended with chilliness and thirst, and a copious discharge of thick matter; with aggravation of the pains at night.

*Calcare*a.—After suppuration is completed, this remedy

will assist the healing of the abscess, and the elimination of the disease from the constitution.

Belladonna.—Severe pains, headache, and much constitutional disturbance.

Arsenicum.—Severe *burning* pain, great debility; abscess having a gangrenous appearance.

China.—When abscesses follow prolonged disease, excessive loss of blood, or diarrhœa. Incipient abscess may often be cut short by the early and frequent use of this remedy.

Aconitum.—It need scarcely be added that whenever feverish symptoms are well marked, this remedy should be administered either alone, or in alternation with any other which the symptoms indicate.

LOCAL TREATMENT.—Abscesses arising from local injury should be freed from all sources of irritation, such as thorns, splinters, etc.

POULTICES.—When it becomes evident that the matter in an abscess cannot be absorbed by the blood-vessels, poultices, made of bread-and-water, linseed-meal, or bran, should be applied. The utility of poultices consists in their power of relaxing the tension of the skin, and so mitigating pain; in promoting perspiration; facilitating the formation of pus; and in determining its progress towards the surface. To secure these objects they should be sufficiently large, soft, and light. As a substitute for a poultice, the *warm-water dressing*, that is, two or three thicknesses of linen wrung out of warm water, and covered with oiled-silk; or the *spongio-piline*, may often be used with advantage, especially during the daytime, and when they are required by persons who are pursuing their ordinary avocations; also during the *formation* of an abscess, and for sores which are very irritable; but when there is much pain, the most soothing application is a large, soft, well-made warm poultice. The application of poultices should be continued till the pain has subsided, and

the cavity begins to granulate; then a cold compress should be applied, and the parts bandaged.

OPENING OF ABSCESSSES.—In ordinary cases of acute abscesses, the use of the lancet is but seldom required, especially when they point and become pyramidal, without enlarging in circumference. In the following cases, however, the early use of the lancet will expedite recovery, and prevent the extension of the disease. The formation of an abscess under strong fasciæ or ligamentous textures, which ulcerate with difficulty; in such a case, unless an artificial opening be made, the pus burrows, extending the abscess to distant parts, and may set up great constitutional disturbance. When an abscess occurs on an exposed part, and it is desirable to avoid the scar which generally ensues when it bursts spontaneously, it should be opened by a surgeon. The use of the lancet is also demanded when abscesses are so situated that they may burst into some internal cavity, such as the chest or windpipe. It may be hardly necessary to add, that when an artificial opening is required the operator should be certain that the knife has entered the cavity of the abscess, and that, if possible, the opening should be made at the most dependent part. It may be well further to add, for the comfort of those who dread pain even in the trifling operation here referred to, that by the use of local anæsthetic agents, nearly all surgical operations may be painlessly performed.

After an abscess has been opened, and its contents discharged, the *Calendula lotion* (one teaspoonful of the tincture to three tablespoonfuls of water), will greatly expedite recovery. It may be applied by saturating a piece of lint, or two or three thicknesses of linen, with the lotion, and covering it with oiled-silk. The dressing should be repeated two or three times a day.

DIET.—As abscesses are generally indications of debility,

a liberal allowance of nourishing food is of great importance; it should include good animal broths, broiled mutton chops, chocolate or cocoa, and, in many cases, good beer or wine.

10.—Boils (*Furunculi*).

NATURE.—A boil is a hard conical tumour of the true skin, resulting from inflammation and a deposit of unhealthy lymph in the part.

Boils are very tender and painful, and end in suppuration. They often occur in crops, or one appears as soon as the preceding one has healed.

CAUSES.—Boils generally indicate a disordered condition of the blood, from unwholesome food, from some unknown atmospheric causes, or from depressing influences generally.

TREATMENT.—*Arnica* relieves the pain, soreness, and tenderness; and, if given early, may prevent the full development of the boil. A dose every three or four hours, for several times.

Aconitum.—When the *Arnica* symptoms are accompanied with considerable feverishness, it may be alternated with *Aconitum* every three hours.

Hepar Sulphur.—When the pain is of a pulsative character, indicative of suppuration, and the point of the tumour changes to a whitish or livid colour, this medicine will facilitate the suppurative process, and, to a great extent, prevent its subsequent extension.

China.—Boils attended with considerable general debility. This remedy may be administered first, in alternation with any other which the local symptoms may require; and afterwards, alone, but combined with nourishing, digestible diet.

Calcis Muriatis.—When boils occur under circumstances when their maturation would be inconvenient, the appli-

cation of a lotion of *Mur. Calcis* (3ss. ad. aq. ʒiv.), will often check them.

Ferri Muriatis.—This is a valuable remedy in oft-recurring boils. The 3rd dec. dil., three to five drops thrice daily.

Sulphur, night and morning for eight or ten days, to prevent a return of the complaint.

GENERAL TREATMENT.—As soon as *Hepar Sulphur* is indicated, a poultice, covered with oiled-silk, should be applied and renewed twice or thrice daily, until suppuration is completed. When boils are of an acute variety, and the skin covering them is very thick, a free incision over them with a sharp lancet will do good service.

In order to prevent a recurrence of boils, attention must be directed to the constitutional causes which originated them. If, as is often the case, they arise from derangement of the digestive organs, abstinence from meats, gravies, pastry, sweetmeats, etc., is imperatively necessary. Correct diet, cleanliness, and healthful exercise will do much towards eradicating a predisposition to boils and other skin affections.

11.—Carbuncle (*Anthrax*).

DEFINITION.—This is of the nature of a malignant boil, marked by a circumscribed inflammation of the subcutaneous cellular tissue, of a flat circular shape, varying in size from one to six inches in diameter, or even larger; of a dusky-red hue; hard, very tender, and painful. It generally occurs on the posterior portions of the neck or back, where vitality is less active.

SYMPTOMS.—As the red swelling gradually increases, the skin covering it assumes a purple or brownish-red tint, and, in a few days, softens, suppuration taking place at several points. The latter is of a thin, watery character, and is scantily discharged, but if pressure be made, a thick glutinous

matter may be squeezed out. It is generally attended by considerable constitutional disturbance, and, if large, and especially if seated on the head, by violent fever, and may result in great and even fatal prostration of strength.

DIAGNOSIS.—Carbuncle differs from a boil in its greater size ; its broad, flat shape ; in its usually appearing singly ; in giving way and discharging from several openings, like a sieve ; in the dusky redness of the inflamed integument, and in the great constitutional disturbance and irritation which accompany it.

CAUSES.—A disordered condition of the blood, usually met with in individuals in a broken state of the constitution, as the result of chronic, exhausting diseases, or severe acute maladies. In the cholera year of 1854, there were in England nearly 400 deaths from carbuncle. Unlike boils, carbuncle is rare in young people ; but is usually met with in debilitated persons, who have passed the middle period of life ; and much more frequently in males than in females.

TREATMENT.—The chief remedies are, *Ars.*, *Silic.*, *Canth.*, *Hyos.* ; also *Acon.*, *Bell.*, *Secale*, *Lyc.*, *Rhus*, and *China*.

Silicea.—A dose every four hours, if given early, will often render the disease of a less painful and serious nature. When it does good, it may be continued for several days.

Arsenicum.—If the carbuncle is very large and painful, and the constitutional prostration very great, this remedy may be given every three or four hours.

Aconitum.—Severe inflammatory fever. It may precede, follow, or be alternated with any other remedy indicated.

Carbo Veg.—Languid circulation, low grade of inflammatory action, a dark, livid appearance of the tumour, with signs of putrescence.

Sulphur, night and morning for a week, when the disease is on the decline, to prevent a recurrence of the affection.

LOCAL TREATMENT.—Early fomentations, followed by a

linseed or bread-and-milk poultice, will mitigate pain by relieving tension, and hasten the cure. In many cases, the simple cold water compress will be the best local application. Extension of the disease may often be prevented by an early and free crucial incision, dividing the tumour into quarters, thus most effectually relaxing tension, and allowing the free escape of pus and slough. But a surgeon should determine when so severe a remedy is necessary, and also make the incisions. In the absence, however, of great tension, very severe pain, or extension of the inflammation, the care of these tumours may be safely confined to nature, attention being directed to such constitutional treatment and soothing applications as each particular case may require.

If there are any signs of putrescence, a yeast poultice should be applied, and sprinkled over with a powder of the first trituration of *Carbo Vegetabilis*. This should be renewed every six hours, till the parts have a more healthy appearance.

DIET.—The diet should be nourishing, consisting of such articles as strong beef-tea, the essence of meat, wholesome wine, etc., at frequent and regular intervals. In very debilitated cases, the brandy-and-egg mixture does great service.

12.—Ulcers.

NATURE.—An ulcer is a chasm on any organ caused by the stripping off of its proper cuticle or epithelium, or by the destruction of a portion of its substance by disease or injury which has not been repaired. The process of ulceration consists of the progressive softening and disintegration of successive layers of the ulcerating tissue.

VARIETIES.—There are many varieties, such as the *healing ulcer*, in which the granulating process goes on uninterruptedly to reparation; the *inflamed ulcer*, hot and painful,

with a red, bleeding surface and a thin ichorous discharge; the *indolent ulcer*, marked by an imperfect form of organization, so as to be incapable of healing; the *fistulous ulcer*, consisting of a narrow channel, with a false mucous membrane, produced by abscesses which have not healed from the bottom; the *spreading ulcer*, in which the destructive process which formed it still existing causes it to extend; the *varicose ulcer*, which generally forms on the lower extremities as the consequence of a varicose condition of those parts. There are also other varieties which need not be further referred to here.

CAUSES.—Ulcers may result from a bruise or burn, or some general derangement of the system occasioned by improper food; or they may be openings of nature for ridding the system of impurities, which, if retained, would produce serious disturbances. “The constitutions most liable to ulceration are those which are debilitated by intemperance or privations, tainted with syphilis or scrofula, or broken down by the excessive use of mercury, or in which the blood is impure from inaction of the liver, skin, and kidneys. The parts most disposed to it are those whose circulation is most languid, such as the lower extremities. On this account, tall persons are more frequently affected with ulcers than the short” (*Druitt*).

TREATMENT.—*Belladonna*.—Red, inflamed, and painful ulcers, accompanied with feverishness and headache. If the general feverishness is very marked, two or three doses of *Acon.* should precede *Bell.*, or be alternated with it. A dose every four hours.

Arsenicum.—Ulcers presenting a livid aspect, readily discharge blood or thin matter if touched, and especially if there is much *burning pain*.

Carbo Veg.—Ulcers having an offensive odour.

Mercurius.—Deeply penetrating ulcers, emitting a bad smelling discharge.

Sulphur.—Obstinate ulcers of long standing.

Hydrastis Canadensis.—This is a valuable remedy in unhealthy ulcers; in addition to administering it internally, it may be used as a lotion to the part.

LOCAL TREATMENT.—The ulcer may be covered with a little soft linen or lint, wetted with cold or tepid water, as is most agreeable to the patient, covered with oiled-silk, and lightly bound over with a bandage. Sometimes it will be desirable to use *Calendula lotion* (thirty drops of the tincture to a teacupful of water), instead of the simple water compress.

ULCERS ON THE LEGS.—In addition to the above treatment, the limb should be well and evenly bandaged from the toes to the knee, applying the bandage more tightly below and more loosely by degrees as it ascends. Laced stockings, or elastic stockings, are very convenient substitutes for the bandage, and are more easily applied. The frequency with which the dressings should be changed depends on the amount of the discharge. If that is considerable, they should be changed every day; otherwise three or four times a week will suffice. In the treatment of ulcers on the leg, as, indeed, on every other part, perfect *cleanliness* is most essential. The filthy habits of many persons, who allow their feet and legs to remain unwashed for weeks together, induce such an imperfect vitality of the skin, that ulcers assume that indolent form which renders them so disagreeable and obstinate in their results. Washing the lower extremities daily is one of the most potent means of preventing and curing the disease, and restoring the lost vitality of the parts.

Moderate out-door exercise may be taken during recovery; but the patient should not stand much, nor sit with the legs hanging down.

13.—Chilblains (*Perniones*).

NATURE.—A low kind of inflammation of the skin, generally of the hands or feet, attended with itching, tingling, burning, swelling, and, sometimes, ulceration.

CAUSES.—Exposure to cold, damp, or to sudden transitions of temperature, such as warming the hands and feet by the fire when cold and damp. Delicate persons, with a constitutional predisposition to skin diseases, are mostly affected.

TREATMENT.—*Arnica*, in nearly all cases, may be used with decided benefit. Bathe the parts twice or thrice daily with a lotion made by adding twelve drops of the strong *Tincture of Arnica* to two table-spoonfuls of water; or *Arnica* may be used in the form of a *cerate*, the parts being gently rubbed with it; or the *cerate* may be smeared over the chilblains, and then covered. Should the skin be broken, and ulcers exist, *Calendula* may be substituted for *Arnica*, and applied in the same manner. Internal medicines are generally required.

Arnica.—Hard, shining skin, with much pain and itching; a dose thrice daily.

Belladonna.—Considerable inflammation, pulsative pain, fiery redness, and swelling of the affected parts.

Arsenicum.—Much burning pain, accompanied by ulceration.

Sulphur.—Chilblains of a blue-red colour, with itching, aggravated by warmth. This remedy may also be given to prevent a recurrence of chilblains.

ACCESSORY MEANS.—If ulceration takes place, apply poultices, or other mild applications to the parts, until relieved. To prevent the development of chilblains the following lotion may be occasionally used for the hands or feet of persons predisposed:—half a dozen drops of the tincture of *Cantharis* or *Arnica* to a table-spoonful of water; that remedy being

chosen which agrees best with the patient. Pork, salted meats, irritating substances, such as pepper, too much salt, and all articles of food that disagree with the patient, should be excluded from the bill of fare. Extremes of temperature are to be avoided, such as a cold stone floor, and warming the feet on a fender or close to the fire. On coming in from the cold external air the fire should not be suddenly approached, and if the extremities are very cold, friction should be resorted to.

ADDITIONAL CURATIVE AND PREVENTIVE MEANS.—The following hints are extracted from correspondence on the subject in *The Lancet* of November 11th and 18th, 1865.

“I and all my brothers and sisters,” writes one correspondent, “suffered for years from very bad chilblains. Remedies of all kinds were tried, but failed to give relief. An old lady, remarkable for her common sense, who was visiting our house, suggested the free use of a *skipping-rope*. The prescription answered beyond all expectation. In a few weeks all our chilblains had disappeared, and never returned. Persons suffering from this complaint should wear thick woollen stockings, and avoid warming their feet by the fire.”

“According to my experience,” Dr. Spencer remarks, “in the treatment of chilblains, the best thing to do locally is to strap them with strips of plaster equally and rather firmly all over. I find that this, by the support it gives to the distended capillaries, hastens the cure more than any form of liniment. As chilblains generally occur in those whose circulation is languid, plenty of exercise in the open air, good living, etc., are required to prevent their recurring again and again.”

Dr. Rattray remarks:—“We all know the proverb, ‘Prevention is better than cure.’ If ‘A Chemist’s Assistant,’ who seems to be in torment with the above annoyance, will only bear in mind the indispensable necessity of guarding against severe and sudden alternations of cold with heat, whether in toes or fingers, I am sure he will be much relieved; at the same time not forgetting to abstain from the common and vulgar practice of exposing the part so affected immediately to the fire. But besides, he should wear wash-leather socks, and gloves lined with wash-leather, or woollen socks or gloves, as the case may be. Soap plaster spread on linen is an excellent means to keep the chilblains unbroken.”

Another correspondent directs :—"Rub gin on the inflamed part for some time, and wrap the foot in linen saturated with it. Of course it should not be applied to any broken places ; but if applied to the parts affected before, it will effectually cure them. Wear slippers with warm lining as well, and get as much exercise as possible."

Mr. Hugh Taylor writes :—"The plan I have found most successful is simply to apply to the inflamed part a piece of soft linen rag thoroughly soaked in cold water, which must then be covered over with a piece of oiled-silk, a trifle larger than the piece of rag. This, by equalizing the temperature of the part, greatly diminishes the tendency to the formation of chilblains."

14.—Whitlow (*Onychia*).

This is an inflammatory swelling at the end of the finger with a tendency to suppuration. Whitlow is very liable to reappear in persons who have once suffered from it ; hence the importance of treating the affection not merely as a local disturbance, but as a constitutional disease.

VARIETIES.—The *cutaneous* whitlow is an inflammation of the surface of the skin of the last phalanx, with burning pain, and effusion of a serous or bloody fluid, which raises the cuticle into a bladder. The *subcutaneous* is attended with great pain and throbbing, and suppuration under the skin at the root of the nail, which often comes off.

CAUSES.—Cutting the nail to the quick ; a bruise, burn, or other mechanical injury ; the introduction of poisonous or acrid matter into scratches on the finger ; unhealthy constitution. It most frequently prevails at the spring of the year, when it often appears to be epidemic, large numbers of persons thus suffering without any apparent local cause.

TREATMENT.—As soon as the first indications of whitlow are noticed, the finger should be held in a raised position in hot water, as hot as can be borne, for two or three hours or longer, and a dose of *Mercurius* taken every three hours. Thus its formation may often be prevented. Should the

above means not succeed, a warm bread-and-milk poultice should be applied, and *Mercurius* taken, as before directed.

Aconitum and *Belladonna*, in alternation, every three hours, if there are much pain, redness, throbbing, thirst, restlessness, etc.

Hepar Sulphur, every four hours, if suppuration is going on.

ACCESSORY MEANS.—If the inflammatory action continue to progress, the finger becoming hard, with much throbbing, a free incision should be made, by a surgeon, to relieve tension, and prevent sloughing. Abscesses and inflammatory swellings generally in the ends of the fingers require surgical openings earlier than those in any other part; for the bones here have no *periosteum*, and hence are sooner diseased; the sheaths too are very dense, as in other parts of the finger, and matter is apt to run close to the bones; and so, unless an early incision be made, the bones die, and come away. Not only so, but the matter is likely to extend to other parts, by burrowing deep beneath the muscles in the course of the tendons and *phalanges* (bones of the finger), and so extend to the hand, and even to the forearm. Under such circumstances, if the matter be not freely evacuated by laying open the parts, a stiff and contracted finger or hand may permanently result by sloughing and suppuration, or the phalanges may necrose, and the finger be destroyed. These facts are, however, often abused by surgeons, and the knife used too freely.

15.—Warts (*Verruæ*).

NATURE.—A wart is a collection of elongated and enlarged papillæ, covered by a strata of hypertrophied and hardened cuticle. Warts generally affect young people, and occur chiefly about the hands and face, and appear and disappear *without any particular known cause*.

TREATMENT.—*Thuja* ϕ applied externally, by rubbing one or two drops on each wart twice or thrice daily; at the same time one drop of the tincture of *Thuja*, as prepared for internal use, or two pilules, should be administered morning and night. This course may be followed for a week, and if improvement ensue, the treatment continued at longer intervals. If this medicine do not succeed, *Rhus Tox.* may be substituted, and used both internally and externally in the same manner.

Sulphur, once a day for a week or two, is an excellent remedy for numerous and obstinate warts upon the hands. It is also useful after other medicines, to eradicate a tendency to the affection.

15.—Corns (*Clavi Pedis*).

NATURE.—A corn is a small thickened mass of epidermis accumulated on the dermis in situations where the papillæ, subjected to undue pressure, or friction, or both, have acquired unnatural proportions. It not only lies upon the dermis, but penetrates into it. A corn may be *hard*, dry, and scaly; or, if situated in places where the secretions of the skin are confined, *soft* and spongy. When inflammation or suppuration takes place underneath a corn, it becomes excessively painful.

CAUSES.—Pressure from tight-fitting boots or shoes;*

* There is no member of the extremities which has been more disgracefully used than the foot. This wonderful organ, by the perfection of which God has "made man upright," and whose structure so pre-eminently distinguishes him from his recently so-called "great-grandfather," the gorilla, has been made to suffer from compression more generally than any other organ. The thought at once suggests the cruel practice of the Chinese, who prevent the growth of the female foot, by placing it in infancy in an unyielding shoe. This fact has had the universal testimony of travellers in China, and if anything more was wanted to prove it, a collection of the feet of Chinese women is at present to be seen in the Museum of the College of Surgeons of England, in which, by careful dissections, the sad havoc to natural growth produced by this heartless custom is scientifically demonstrated (Lankester).

hereditary predisposition sometimes seems to favour their development.

TREATMENT.—*Arnica*.—As soon as corns appear, the surrounding skin should be softened by a warm foot-bath, the hard head of the corn gently extracted with the finger nail, or some convenient instrument, and the thickened skin pared off, wounding the adjacent parts as little as possible. The corn should then be dressed with a lotion prepared by adding thirty drops of the strong *Tincture of Arnica* to a wine-glassful of water, and next morning a piece of *Arnica plaster*, or an *Arnicated corn-plaster*, applied. The dressing may be repeated several times, till the inconvenience is removed. The *Arnicated amadou* or *felt plaster*, having a hole punched in it to receive the corn so as to relieve it from pressure, is a very useful contrivance.

If internal treatment is necessary, *Calcarea* and *Sulphur* will be the most suitable medicines. *Calcarea* may first be administered every night and morning for a week or ten days; and then, after waiting a few days, *Sulphur* in the same manner. After pausing four or five days, if necessary, the course may be repeated.

SOFT CORNS.—These are best treated by cutting off the thickened skin with sharp scissors, taking care to wound the surrounding parts as little as possible; then applying a drop or two of the strong tincture of *Arnica*, and always wearing a layer of cotton-wool between the toes, changing the wool daily.

ACCESSORY MEANS.—Patients afflicted with corns can only be permanently relieved by wearing ample boots and shoes, often washing the feet with cold water, and frequent change of stockings.

16.—Bunions.

NATURE.—A bunion is an enlarged normal or adventitious bursa over the metatarsal joint of the great toe. If recent, it may be thin, and easily burst under pressure; it may be thick, tender and inflamed, and contain liquid; it may be indolent and thick, but not tender; or it may be in a state of suppuration.

CAUSES.—The pressure of narrow-pointed boots or shoes, throwing the great-toe over or under the contiguous toes; in this way a sharp angle is made on the inner side of the joint of the great toe, and on this angle the bunion is formed.

SYMPTOMS.—Pain, redness, and swelling of the part, which soon subside on removal of the cause. Should, however, undue pressure be continued, the pain, redness, and swelling increase until pressure becomes unendurable. On discontinuing the offending boot or shoe, the pain and redness subside; but a permanent bunion has been formed, and inflammatory symptoms are at any time liable to recur from irritation.

TREATMENT.—The direction of the toe must be changed by wearing properly-shaped boots, made with the inner side of the sole straight from the toe to the heel. If irritation be accidentally excited in the part, the warm foot-bath should be used, and afterwards it should be bathed with a lotion made by adding twenty drops of *Arnica* ϕ to two table-spoonfuls of water, and continuously applied for two or three days. If *Arnica* disagrees with the patient, *Calendula* may be substituted. Should the inflammation be followed by the formation of matter, a linseed-meal poultice will be more suitable; at the same time a dose of *Hepar Sulphur* may be given every four hours.

Veratrum Viride painted on bunions is generally a rapid and perfect relief. The fact will suffice without citing the

cases. There is no agent comparable to *Verat. Vir.* for bunions or inflamed corns (*J. G. Wilkinson*).

PREVENTION.—If the *Arnica* or *Verat. Virid.* lotion be used immediately the first inflammatory symptoms arise, and all undue pressure at once and permanently discontinued, the formation of a bunion may be altogether prevented.

CHAPTER XIV.

ACCIDENTS.

1.—Bruises (*Contusions*).

DEFINITION.—A bruise is an injury inflicted on the surface of the body without laceration of the skin (*subcutaneous*). The injury may be slight, involving only the rupture of minute blood-vessels, and perhaps the tearing of some muscular fibres; or there may be a large blood-vessel torn, or even a complete disorganization of the tissues beneath the skin, as from a spent cannon ball. The remarkable properties of elasticity and toughness possessed by the skin often permit serious damage to its underlying structures while it remains entire.

CAUSES.—Usually from a blow by a hard, blunt body; from being forcibly squeezed between two forces, as a wheel passing over a limb and crushing it; or indirectly, as when the hip-joint is contused by a person falling on his feet from a height.

TREATMENT.—In the less severe form of bruises, which alone come under domestic treatment, the object should be to excite as speedily as possible the absorption of extravasated blood. To this end the bruised part should, if practicable, *be raised*, and a *warm* lotion applied, consisting of one part

of the strong tincture of *Arnica* to ten of water; the application should be made by saturating lint with the lotion, and covering it with oiled-silk, so as if possible to exclude the air. The value of this application is undoubted, and happily is now becoming generally recognised. The writer is gratified to find in his visits to the wards of the largest metropolitan hospitals that *Arnica* is now extensively used in external injuries. When pain or tenderness has subsided, a bandage should be applied. On the other hand, leeches or punctures, where there is any chance of procuring absorption by other means, should never be resorted to, as air would thus be admitted to the part, and suppuration be set up. See also *Veratrum Viride*, under *Ecchymosis*.

ECCHYMOSIS follows a bruise, and is the discoloration consequent on extravasated blood under the skin, being first of a reddish colour, but speedily becoming black. During recovery the parts change, first to a violet colour—the line which defined the bruise becoming indistinct—afterwards green, then yellow, and thus, sooner or later, according to the health of the individual, or the quantity of blood poured out, the discoloration disappears.

Arnica Lotion, as just prescribed, has great power in ecchymosis, and if used immediately after the accident may altogether prevent discoloration.

Veratrum Viride.—Dr. Wilkinson recommends this remedy to be applied locally, by painting it over the injured surface, as possessing great power in abolishing traumatic inflammation.

2.—Wounds.

A wound may be defined as a solution of continuity, or separation by external violence of parts which ought to be united. Wounds of the soft parts are of four kinds:—*Incised*, made by clean-cutting instruments; punctured, the

depth exceeding the breadth, such as stabs; *lacerated*, the parts are torn and the lips of the wounds irregular; and *contused*, effected by bruising as before considered. We may also add, *gun-shot* and *poisoned* wounds, and, according to law, *burns*.

TREATMENT.—The following points require attention :—

1st. *To arrest the bleeding.* In most cases, the elevation of the part, keeping the bleeding surface uppermost, the application of cold, moderate pressure, and the coaptation of the sides of the wound, suffice to check bleeding. A lotion made of *Arnica* or *Calendula* will greatly facilitate the arrest of hæmorrhage, and also check the suppurative process. In severe wounds involving arteries, the parts should be laid open by a surgeon, and the wounded vessels ligatured. This point is considered further on.

2nd. *The removal of foreign bodies.* Dirt, hairs, glass, clots of blood, etc., should be speedily removed by the fingers, forceps, or sponge and water. Even blood is no bond of union, and any present in a wound would act as a foreign body and lead to suppuration. If there is ever so little blood it must be absorbed, and a little delay and exposure of the wounded part to the cold air are useful, because the mouths of small vessels contract under such stimulus, and oozing of blood is thus prevented.

3rd. *To bring the injured parts into nice apposition.* Any muscular fibres likely to prevent complete union should be relaxed or divided, and after the sides of the wound have been accurately adjusted, they must be kept so by strips of adhesive plaster, first applied to that side of the wound which is most movable, and then secured to the other. As a substitute for plaster, *collodion*, or thick mucilage, may be used, observing, before applying it, great care in bringing the edges of the wound together. But in extensive wounds of the eyebrows, ears, and in all wounds

of unsupported muscular parts, and others where good union is most desirable, as well as in all extensive wounds where plaster would be insufficient, *sutures* should be employed. There are four modes of suture—the *interrupted*, the *uninterrupted*, the *twisted*, and the *quill* suture. The circumstances of each case can only enable the surgeon to select the kind most appropriate.

4th. *To promote adhesion.* To secure this the wounded part should be kept at rest, and, if the injury is severe, the patient should keep in bed to prevent the exuded lymph from being disturbed or decomposing. If bandages or sutures cause pain and swelling they must be removed, for the wound cannot, under these circumstances, heal by the *first intention*. Fomentations and poultices must be applied till the inflammation has subsided, or suppuration is established. Afterwards the parts may be gently approximated, that they may heal by the *second intention*.

5th. A wound thus attended to, under favourable circumstances, will heal by what we have called *first intention*, that is, without the discharge of any matter, and leaving but a trifling *cicatrix* (scar). On the other hand, if the wound suppurates, it requires weeks, sometimes months, to heal, and leaves a larger *cicatrix*.

6th. When a wound is *dressed*, say once in every twenty-four hours, a rag should be wetted with warm water, and laid over the dressing, so that it may be removed without the risk of disturbing the surfaces which may have begun to unite. Sometimes the lotion may be renewed by removing the oiled-silk only, and pouring a little lotion on the rag or lint by means of a spoon, and then replacing the oiled-silk.

7th. *To control dangerous bleeding*, as from a severe cut-wound. The greatest danger is usually from a sharp-cutting instrument, and presence of mind and intelligence are necessary for proper treatment. If the blood flows from the

wound in a *steady stream*, and is *dark-coloured*, it is from a vein, and can generally be checked by applying cold water, and exposing the cut surface to the cold air. But if large veins are wounded, they should be compressed with the fingers, or by a compress bound to the part. A few thicknesses of linen, with steady compression, are more efficient than heaping on a large quantity. If the blood is *bright-red* and flows in *jets*, it is *arterial hæmorrhage*, and the same means must be adopted as just pointed out for venous blood, unless the bleeding is excessive, in which case, a handkerchief should be tied round the limb, just above the wound, and between it and the heart; a stick should be inserted under the handkerchief, and a firm compress over the course of the blood-vessel; the stick should then be twisted until it stops the circulation, and consequently the bleeding. These measures are, of course, only temporary, as wounded arteries of size require to be *ligatured* by a surgeon before bleeding can be permanently arrested. If no surgeon can be obtained, a clever manipulator should grasp the wounded artery with a pair of forceps, and draw it slightly and gently forward, so that it may be securely tied by means of a strong ligature of silk.

8th. Should a wound or bruise be followed by constitutional disturbances, feverishness, chilliness, and throbbing in the parts, medicines should be administered internally. *Arnica* (as prepared for internal use) and *Aconitum* will generally meet the requirements of such cases, and should be administered every three hours, in alternation, for several times.

Belladonna.—If the injured part is very painful and swollen, a few doses may follow the above.

Hepar Sulph.—When suppuration is established.

Silicia.—Unhealthy suppuration.

3.—Cuts.

A moderate-sized cut requires nothing more than the bringing together of the edges of the gaping wound, and maintaining them so by narrow strips of *Arnica plaster*, and then, if necessary, applying a bandage over the plaster. After three or four days, the plaster should be wetted with warm water, carefully removed, and replaced by new. If, however, pain or inflammation occur, lint, saturated with *Calendula lotion*, and covered with oiled-silk, should be applied over the plaster for a few days. For further treatment, see under “Wounds.”

4.—Burns and Scalds.

Burns may be divided into three classes—those producing *mere redness*, which soon terminate in resolution; those causing *vesication*, in which the inflammation is more serious, leading to the exudation of serum, and the formation of vesicles, which, in slight cases, soon dry up and heal, or, if the skin has been much injured, may be succeeded by very obstinate ulcers; and those attended with *mortification* from destruction of the tissues. The last-mentioned, although probably exempt from pain, are far more serious. The danger of burns depends more upon their *superficial extent* than upon the depth of the injury. *Burns on the trunk, head, or neck*, are far more perilous than those of an equal extent on the extremities. Children appear to suffer much more severely from burns than adults.

The constitutional disturbances, and the periods of danger consequent on burns, in whatever degree, have been divided into three stages: 1. Depression and congestion, during the first four or five days; 2. Reaction and inflammation, in which the patient may sink with an affection of the head, chest, or abdomen; 3. Suppuration and exhaustion, which

may continue from the second week to the close, and is often associated with hectic, inflammation of the lungs, or pleurisy.

TREATMENT.—A most important object to be attained is to cover the injured part with some suitable material that will *exclude atmospheric air*, which should not be removed till the cure is complete. The following are the local applications most frequently used :

1. *Cotton Wool.*—This should be immediately used to cover thoroughly the burnt part, after it had been first well saturated with oil. It must be so closely applied and in such layers as to preclude the access of air. If the wound is large, and the cotton becomes hard and uncomfortable, it should be softened by pouring a little oil upon it, without removing it.

2. *Soap.*—Moisten white or brown soap in water, and rub it on a piece of linen so that the soap forms a coating on the linen as thick as a shilling, and larger than the wound it is intended to cover, so that it may the more perfectly exclude the air.

3. *Flour.*—This is an excellent substitute in the event of either of the above not being at hand. The finest wheaten flour, or finely-powdered starch, should be uniformly and thickly applied by an ordinary dredger; it soon forms a thick crust by admixture with the fluids discharged from the broken surface, and thus excludes the air. It should be repeated from time to time as any portions fall off.

4. *Hot alcohol.*—The writer has used this in severe burns with the very best results, in the following manner. Several separate layers of rags, steeped in the spirit, should be laid over the burnt surface, immediately after the accident, and directly covered to prevent evaporation, and to maintain the heat. If an extensive surface of the body is injured, a person may be almost constantly occupied in removing one or

two external layers and rewetting those next to the skin, but which must be by no means disturbed, and immediately covering them again. Bottles containing the spirit should be placed in a bowl filled with hot water, so that a constant supply of warm alcohol may be at hand. As the dressing must be continued through the night, caution is necessary in reference to the candle or lamp, as the alcohol is highly inflammable. The application of a strong stimulant like alcohol is probably by far the most efficacious plan of treatment, mitigating pain and hastening recovery. Turpentine, or other strong spirits, may be substituted for the alcohol.

5. Another remedy is *Cowdung*.—"A most primitive but very effectual remedy," says Dr. Thomas, "in the treatment of burns and scalds, is cowdung; and, from its being so rich in phosphorus, must exert a specific as well as a mechanical action to cure injuries resulting from fire. I mention it here, having known several severe burns and ulcers to be promptly and successfully cured by its use; and in order to make this article useful in all circumstances, I think it would hardly be complete without reference to this cure."

Having selected the local remedy, the points of greatest importance are, its *immediate application* to the injured surface, the complete exclusion of atmospheric air, and the changing of the dressings as unfrequently as possible, not, indeed, until they have become loosened or foetid from the discharges. A *complete* change of dressing often causes the detachment of portions of the new skin, occasions severe pain and depression, and so materially retards the cure.

If, after the removal of the first dressing, ulcers are found to exist, *Arnica* or *Glycerine cerate* will be a suitable application. If there is much discharge, it should be carefully and frequently removed, and the parts kept as cleanly as possible.

INTERNAL TREATMENT.—Except in very slight cases this is

always necessary, and must be suited to the part injured, its extent, and the constitutional symptoms present. As a general rule, *Aconitum* will do good, by allaying any febrile symptoms, mitigating pain, and moderating reaction.

SCALDS.—When blisters are produced, cover them with a layer of cotton wool steeped in *Cantharides* lotion (one part of tincture of *Cantharis* ϕ to ten or twelve parts of water); at the same time administer *Cantharis* internally.

5.—Sprains.

DEFINITION.—A sprain is an overstretching of the ligaments and tendons, generally with a rupture of some of their fibres, at the wrist, knee, ankle, and other joints. It is an injury of frequent occurrence.

TREATMENT.—The chief point is to keep the parts at perfect rest, by the application of a roller nicely applied, and the motions of the joint controlled by a splint. This is almost invariably necessary; as, unless rest is secured by these means, injuries of joints recover very slowly.

Before applying the roller over the injury, the joint should be covered with one or two thicknesses of linen rags saturated with *Arnica* lotion (one teaspoonful of *Arnica* ϕ to two tablespoonfuls of water), and covered with oiled-silk to prevent evaporation. At the same time, *Arnica*, as prepared for internal use, may be administered; a dose every four hours.

Aconitum, in alternation with *Arnica*, may be given, if the joint becomes swollen and painful; and, especially, when constitutional disturbance attends the injury.

When the pain and swelling subside, the joint may be partially liberated, and gentle motion allowed; but the greatest care must be exercised for several weeks in using the hand, or attempting to walk, as the injury may easily be *reinduced*, and then the cure becomes much more difficult *and tedious*.

6.—Muscular Fatigue from Over-exertion.

Unaccustomed, excessive, or too prolonged exertion, as from walking, rowing, cricket, etc., often results in a bruised or painful feeling in the limbs and joints.

TREATMENT.—*Arnica*.—Excessive fatigue, with *soreness* or pain on moving.

Rhus Tox.—*Pains in the joints*, from lifting or other violent exertion.

Aconitum.—Disturbance of the circulation—palpitation, pain in the side, difficulty of breathing, etc.—from running or violent exercise of any kind.

Bryonia.—Pains in the chest and limbs, increased by breathing or moving. *Bry.* is often useful after *Acon.*

Veratrum.—Fainting from fatigue.

ARNICATED BATHS.—If the feet are swollen or blistered, or the ankles ache after walking or running, a warm foot-bath may be used, to which a teaspoonful of the strong tincture of *Arnica* is added, the relief afforded being generally immediate and permanent. If the hands or wrists ache from excessive or unaccustomed exertion, they may be bathed in about a pint of water, to which twenty or thirty drops of *Arnica* have been added. If necessary, in one or two hours, the application may be repeated. In muscular fatigue from long-continued, or short but severe exertion, affecting the hips, thighs, etc., a hip-bath, to which a drachm of the strong *Tincture of Arnica* has been added, is an excellent remedy. The patient should remain in the bath about five minutes. Arnicated baths, to whatever part applied, should be *warm* if used in the evening, or soon after exertion. If, however, the bath is used after the night's rest, it should be cold. If *Rhus Tox.* is selected for internal use, it should also be used externally, as directed for *Arnica*.

7.—Concussion of the Brain—Falls—Stuns.

DEFINITION.—Concussion is a partial interruption to the functions of the brain from a mechanical shock, such as a fall or heavy blow, and may vary in degree from a slight stun to extinction of life.

SYMPTOMS.—Insensibility; pale face; small, sometimes imperceptible pulse; stertorous breathing; cold extremities, etc. By shaking the patient, or calling his name loudly in his ears (which should, however, never be done), he will probably give a surly answer, and soon become insensible again. After a time, longer or shorter according to the severity of the injury, reaction comes on, and consciousness returns, often with vomiting. At first the reaction may be imperfect, and it is often several days or weeks before the power of the mind is restored.

TREATMENT.—*Arnica*.—Place two pilules upon the tongue, or moisten it with a few drops of the tincture by means of a feather or quill, and repeat the dose every hour for several times, or until another remedy is required, in consequence of reaction, or inflammation coming on.

Aconitum should be administered alternately with *Arnica*, if fever attend the return of consciousness. *Belladonna* will be most suitable if the head aches, becomes very hot, or other head symptoms predominate. A dose every hour, repeated several times.

EXTERNAL APPLICATIONS.—Should there be any bruise or external wound, two or three folds of linen-rag wrung out of *Arnica lotion* (twenty drops of the strong tincture to four tablespoonsful of water), should cover the injured part, and be protected with oiled-silk.

GENERAL TREATMENT.—The patient should be placed in a warm bed, with his head at first moderately low, and warmth applied to his extremities and *axillæ* (arm-pits). On no account should he be induced to eat or drink, but be kept very

quiet, without attempting to arouse him. When reaction comes on, the head should be raised a little, and cold evaporating lotions applied to it, keeping the patient at the same time in a cool, quiet room, with the light modified, and noise and conversation shut out. He must be under care for two or three weeks, lest some insidious inflammation should arise within the head.

The following case, treated in the Doncaster Homœopathic Hospital, is quite to the point, and is an interesting illustration of the treatment:—

“Some boys were running on the parapet of a bridge that crosses the railway, when one boy knocked his playmate, who was six years old, over, and he fell on his head on the rail beneath. He was picked up and brought in an unconscious state to St. James’ Hospital, where he remained in that condition for *four days and nights*. During this time he had no evacuation either of urine or fæces. A drop of the third dilution of *Arnica* was put into his mouth every hour; and on the fourth day the little fellow opened his eyes, and seeing his father sitting by his bedside, he said, ‘Dadda, where am I?’ He rambled occasionally for seven days, when complete consciousness returned. He voided a little urine on the fourth day, and on the eighth day he had a small evacuation from the bowels. He left the hospital on the fourteenth day after his accident, and has remained in perfect health ever since. This patient only took *Arnica* and *Belladonna*. It may be said there is nothing extraordinary in this recovery, and it can in no wise establish the benefits of *Arnica* in restoring health to the injured part; but imagine for a moment what the allopaths would have done. It is not likely they would have been satisfied with a drop of *Arnica*. It is more likely that leeches would have been applied to the head, that calomel purges would have been tried to rouse the torpid bowels to action, and that various devices, such as mustard poultices to the calves of the legs or soles of the feet, or some other mode of torturing the poor victim would have been resorted to, and yet the patient might have recovered in spite of all this. But consider the difference—the convalescence in one case, and the protracted cure in the other! Had the allopathic treatment been adopted, many weeks must have been occupied in simply recovering the patient from the state of prostration to which that treatment would have brought him” (*Yeldham*).

8.—Collapse (*Prostration—Shock to the nervous system*).

DEFINITION.—Collapse is that general depression of the vital powers and actions which immediately follow any severe injury. If the *vascular* system is most implicated, the heart's action is so depressed that the pulse is scarcely perceptible; if the *brain* or nervous system, the patient is insensible, or bewildered, and his speech incoherent, as if he were intoxicated or had taken a narcotic poison.

CAUSES.—Sudden and overwhelming grief or fear; corrosive poison; *great loss of blood*; and mechanical injuries, especially of vital organs, or that cause severe pains, or occur in very aged or enfeebled persons.

TREATMENT.—Such measures should be adopted as are calculated to stimulate the heart and brain to *moderate reaction*—hot brandy-and-water; essence of beef; heat applied to the arm-pits, the feet, and between the thighs, etc. See the preceding article on “Concussion.”

9.—Suspended Animation.

DIRECTIONS FOR RESTORING THE APPARENTLY DEAD. FROM DROWNING.

From experiments conducted by the Medico-Chirurgical Society of London, it has been proved that the heart's action continues on an average for three minutes fifteen seconds after the animal has ceased to make respiratory efforts. On this fact rests our hope of recuscitating persons suffocated, if *artificial respiration* be opportunely resorted to and persevered in. The best method of performing artificial respiration is described and illustrated in this section. The annexed important Instructions for Restoring the Apparently Dead from Drowning, are the result of very extensive and careful enquiries instituted by *The Royal National Life-Boat*

Institution, amongst medical men, coroners, and others throughout the United Kingdom. The accompanying illustrations and instructions, issued by the above valuable Institution, cannot fail to be understood by any intelligent person.

I.

Send immediately for medical assistance, blankets, and dry clothing: but proceed to treat the patient *instantly* on the spot, in the open air, with the face downwards, whether on shore or afloat, exposing the face, neck, and chest to the wind, except in severe weather, and removing all tight clothing from the neck and chest, especially the braces.

The points to be aimed at are—first and *immediately*, the *restoration of breathing*; and, secondly, after breathing is restored, the *promotion of warmth and circulation*.

The efforts to *restore breathing* must be commenced immediately and energetically, and persevered in for one or two hours, or until a medical man has pronounced that life is extinct. Efforts to promote *warmth and circulation*, beyond removing the wet clothes and drying the skin, must not be made until the first appearance of natural breathing; for if circulation of the blood be induced before breathing has recommenced, the restoration to life will be endangered.

II.—TO RESTORE BREATHING.

To Clear the Throat—Place the patient on the floor or ground with the face downwards, and one of the arms under the forehead, in which position all fluids will more readily escape by the mouth, and the tongue itself will fall forward, leaving the entrance into the windpipe free. Assist this operation by wiping and cleansing the mouth.

If satisfactory breathing commences, use the treatment described below to promote Warmth. If there be only slight breathing, or no breathing, or if the breathing fail, then—

To Excite Breathing—Turn the patient well and instantly on the side, supporting the head, and excite the nostrils with snuff, hartshorn, and smelling-salts, or tickle the throat with a feather, etc., if they are at hand. Rub the chest and face warm, and dash cold water, or cold and hot water alternately, on them.

If there be no success, lose not a moment, but instantly—

To Imitate Breathing—Replace the patient on the face, raising and supporting the chest well on a folded coat or other article of dress.

Turn the body very gently on the side and a little beyond, and then briskly on the face, back again; repeating these measures cautiously, efficiently, and perseveringly about fifteen times in the minute, or once every four or five seconds, occasionally varying the side. (*By placing the patient on the chest, the weight of the body forces the air out; when turned on the side, this pressure is removed, and air enters the chest*).

On each occasion that the body is replaced on the face, make uniform but efficient pressure, with brisk movement, on the back, between and below the shoulder-blades or bones on each side, removing the pressure immediately before turning the body on the side. During the whole of the operations let one person attend solely to the movements of the head and of the arm placed under it. (*The first measure increases Expiration, the second commences Inspiration*).

. The result is Respiration or Natural Breathing; and if not too late, Life.

Whilst the above operations are being proceeded with, dry the hands and feet; and as soon as dry clothing or blankets can be procured, strip the body and cover or gradually reclothe it, but taking care not to interfere with the efforts to restore breathing.

FIG. 1.—INSPIRATION.



FIG. 2.—EXPIRATION.



Figs 1. and 2.—To illustrate the position of the body during the employment of Dr. Marshall Hall's Method of Inducing Respiration.

III.

Should these efforts not prove successful in the course of from two to five minutes, proceed to imitate breathing by Dr. Silvester's method, as follows :—

Place the patient on the back on a flat surface, inclined a little upwards from the feet; raise and support the head and

shoulders on a small firm cushion or folded article of dress placed under the shoulder-blades.

Draw forward the patient's tongue, and keep it projecting beyond the lips: an elastic band over the tongue and under the chin will answer this purpose, or a piece of string or tape may be tied round them, or by raising the lower jaw the teeth may be made to retain the tongue in that position.

Remove all tight clothing from about the neck and chest, especially the braces.

To Imitate the Movements of Breathing.—Standing at the patient's head, grasp the arms just above the elbows, and draw the arms gently and steadily upwards above the head, and keep them stretched upwards for two seconds. (*By this means air is drawn into the lungs*). Then turn down the patient's arms, and press them gently and firmly for two seconds against the sides of the chest. (*By this means air is pressed out of the lungs*).

Repeat these measures alternately, deliberately, and perseveringly, about fifteen times in a minute, until a spontaneous effort to respire is perceived, immediately upon which cease to imitate the movements of breathing, and proceed to *induce Circulation and Warmth*.

IV.—TREATMENT AFTER NATURAL BREATHING HAS BEEN RESTORED.

To promote Warmth and Circulation.—Commence rubbing the limbs upwards, with firm grasping pressure and energy, using handkerchiefs, flannels, etc. (*By this measure the blood is propelled along the veins towards the heart*).

The friction must be continued under the blanket or over the dry clothing.

Promote the warmth of the body by the application of hot flannels, bottles, or bladders of hot water, heated bricks, etc., to the pit of the stomach, the arm-pits, between the thighs, and to the soles of the feet.

FIG. 3.—INSPIRATION.



FIG. 4.—EXPIRATION.



Figs. 3 and 4.—To illustrate the position of the body during the employment of Dr. Silvester's Method of Inducing Respiration.

If the patient has been carried to a house after respiration has been restored, be careful to let the air play freely about the room.

On the restoration of life, a teaspoonful of warm water should be given; and small quantities of wine, warm brandy-and-water, or coffee, should be administered, as soon as the

power of swallowing has returned.* The patient should be kept in bed, and a disposition to sleep encouraged.

General Observations.—The above treatment should be persevered in for some hours, as it is an erroneous opinion that persons are irrecoverable because life does not at once make its appearance, persons having been restored after persevering for many hours.

Cautions.—Prevent unnecessary crowding of persons round the body, especially if in an apartment.

Avoid rough usage, and do not allow the body to remain on the back unless the tongue is secured.

Under no circumstances hold the body by the feet.

On no account place the body in a warm bath, unless under medical direction, and even then it should only be employed as a momentary excitant.

Appearances which generally accompany Death.—Breathing and the heart's action cease entirely; the eyelids are generally half-closed; the pupils dilated; the jaws clenched; the fingers semi-contracted; the tongue approaches to the under edges of the lips, and these, as well as the nostrils, are covered with a frothy mucus. Coldness and pallor of surface increase.

* The Homœopathic preparation of *Camphor* is a valuable stimulant in such circumstances.

CHAPTER XV.

HÆMORRHAGE (*Loss of Blood*).

By the term “hæmorrhage” is meant the escape of blood from those vessels in which it is naturally contained, whether the discharge be external, or into one of the internal cavities of the body. Hæmorrhages may have a *constitutional* origin, or they may be *accidental* (traumatic), as when a blood-

vessel has been divided. It is to the constitutional or spontaneous variety that we refer in this chapter. Accidental hæmorrhages are considered in the sections on "Wounds" and "Cuts." Hæmorrhages, especially if profuse or long-continued, are so dangerous, and the results, even after the discharge of blood has ceased, are often so serious that it is most undesirable, except in emergencies, to trust to domestic treatment. In consideration, however, of the frequently unexpected nature of such occurrences, of the impossibility of securing at all times the immediate attendance of a medical man, and of the importance of being prepared to act promptly for their temporary relief, we have devoted a short chapter on the immediate treatment of several forms of hæmorrhage of frequent occurrence.

1.—Bleeding of the Nose (*Epistaxis*).

Epistaxis is of frequent occurrence in children. A fit of sneezing or coughing, sharp exercise, a slight blow, or even the heat of summer, is often a sufficient exciting cause. Bleeding of the nose also occurs during the course of many diseases, or at their termination, and often affords considerable relief. It should not, therefore, be interfered with unless it is excessive, recurs too frequently, and takes place under a weak condition of the system. When it is the result of injuries, or occurs in persons already reduced by disease, remedies should be administered.

CAUSES.—An unnatural state of the circulation, and undue fulness of the blood-vessels of the head, which being enclosed in an unyielding case of bone, an escape is thus provided for a temporary superabundance of blood. In children there is a *foramen* which transmits a blood-vessel from the brain to the nose, and through which the gorged vessels are relieved. Children, uncontrolled by reason, often

put themselves in dreadful fits of rage, and under such excitement the amount of blood in the brain becomes greatly increased, so that the face gets almost black from the veins which meander in the neighbourhood of the nose. At this juncture the nose often bleeds, and thus, probably, disastrous results are warded off. In adult life, however, when the passions should be under the control of the reasoning powers, no such provision exists, this foramen being then obliterated.

In some adult persons, under peculiar conditions of the system, epistaxis occurs periodically, and then its *cessation*, rather than its continuance, may become, without judicious treatment, a source of danger. In men it is apt to succeed the hæmorrhoidal discharge, and in young women it may be *vicarious* of the menstrual function, and is frequently present during suspended menstruation. In other cases it forms a part of a constitutional hæmorrhagic diathesis, or it may result from local disease of the nostrils.

TREATMENT.—*Ipec.*, *Arn.*, *Sec.*, *Sulph. Ac.*, *Chin.*, *Croc.*, *Acon.*, *Bry.*, *Ferr.*, *Calc.*, *Carbo Veg.*

Aconitum.—Bleeding after being over-heated, or in plethoric patients, with fever, strong pulsations of the arteries of the temples and neck, and hurried, full pulse. A dose every fifteen, twenty, or thirty minutes for several times.

Arnica.—Epistaxis from external violence, such as a blow, fall, or excessive bodily exertion, preceded by heat and itching of the nose.

Pulsatilla.—If it occur in females from suppressed or scanty monthly discharge (*vicarious hæmorrhage*),* *Pulsatilla* or *Bryonia* should be administered, according to the indications that may be present.

Carbo Veg.—Epistaxis with suppression of bleeding piles.

* See "The Lady's Manual of Homœopathic Treatment."

China.—If the bleeding has been so excessive as to weaken the patient, and produce paleness of the face, tendency to fainting, etc. A dose three or four times daily for a week or ten days. The food should be nourishing, and taken at regular hours.

Sulphur.—In chronic cases, and to correct that constitutional condition which favours the hæmorrhage.

ACCESSORY MEASURES.—During the bleeding, the patient should be freely exposed to fresh air, and be kept standing, as in this posture fainting is much more readily induced than in the recumbent; and this is one of nature's methods of arresting hæmorrhage. Stimulating food or drink, together with every circumstance likely to quicken the circulation, should be carefully avoided. The application of cold is a most successful means for arresting hæmorrhage; it may be applied to the nose or forehead by a handkerchief wetted in cold water, or by ice, or by the sudden application of cold water to the neck or back, or by placing a cold key or any other iron instrument to the spine. In these latter instances, the influence of cold is not restricted to the part to which it is immediately applied; the bleeding is arrested by the sympathetic constriction of blood-vessels which it produces in remote parts. In most cases, however, the simple plan of causing the patient to raise his arms above his head, and holding them so for a short time, promptly arrests hæmorrhage.

If, in spite of these means, the bleeding continues so long as to appear to endanger life, the nostrils should be plugged by means of linen rags rolled together so as to form two plugs, and in severe cases should not be disturbed for two or three days. In making the plugs, it should be remembered that the "posterior openings of the nasal fossæ" are somewhat oval, about one inch in the long diameter, and half an inch in the transverse, and that sufficient length of the linen

should be left outside by which to withdraw them when the hæmorrhage has ceased.

Plethoric persons, predisposed to epistaxis or to congestions, should lead a temperate life, avoid stimulants, use frequent ablutions of cold water, and take moderate exercise daily in the open air. Immoderate exertion and much stooping are injurious. On the other hand, delicate persons, of spare habit, are benefitted by nourishing food.

2.—Hæmoptysis (*spitting of blood*), AND Hæmatemesis (*vomiting of blood*), FROM RUPTURE OF A BLOOD-VESSEL.

It is not always necessary to determine whether the blood comes from the lungs or stomach, as the immediate treatment should be the same in either case. The following points will, however, enable almost anyone to distinguish between these conditions :

HÆMOPTYSIS.

1. In hæmoptysis the blood is of a *bright-red* colour.
2. The blood is *coughed* up.
3. The blood is *frothy* and mixed with *sputa*.
4. Is preceded by pain in the *chest* and dyspnœa.
5. Blood is *rarely* found in the stools.

HÆMATEMESIS.

1. In hæmatemesis the blood is of a *dark* colour, from admixture with hydrochloric acid.
2. The blood is *vomited*.
3. The blood is often mixed with *food* and is *not* frothy.
4. Is preceded by nausea and *stomach* distress.
5. Blood is generally passed *with the evacuations* from the bowels.

TREATMENT.—The following are the chief remedies:—*Acon.*, *Sulph. Ac.*, *Ipec.*, *Arn.*, *Chin.*, *Phos.*, *Bell.*, *Ham.*, *Nit. Ac.*

Aconitum.—Chiefly indicated when flushed face, palpitation, and anguish accompany the hæmorrhage; or for the premonitory symptoms in frequent attacks, such as shiver-

ings, quick pulse, palpitation, etc. One drop of tincture, or two pilules, in a table-spoonful of water, repeated in ten or fifteen minutes, or in one, two, or three hours, according to the urgency of the symptoms.

Arnica.—If a fall, blow, or severe exertion has caused the hæmorrhage, this remedy may be substituted for *Acon.*; if *inflammatory* symptoms predominate, the two remedies may be alternated.

Ipecacuanha.—Paleness of the face, almost constant inclination to vomit, frequent, short cough, salt taste in the mouth, expectoration streaked with blood. Often useful after *Acon.*, and before the administration of *China* or *Ars*.

China.—Chiefly required after hæmorrhage for removing the consequent debility. Its chief indications are, constant taste of blood, shivering, flushes, dizziness and heaviness of the head, feebleness of the pulse, cold hands or feet, fainting, etc.

Arsenicum.—Difficult breathing, extreme palpitation of the heart, anguish, burning heat, thirst, and small, quick pulse.

Ferrum.—Spitting or coughing up of blood, with palpitation, faintness, etc.

Chloride of Sodium.—If no other remedy is at hand, a teaspoonful of common salt, dissolved in about a wineglass of water, or, if preferred, swallowed dry, seldom fails to arrest hæmorrhage temporarily. The immediate successful use of this remedy must not, however, on any account lead to the neglect of the other remedies and measures prescribed.

Vicarious hæmorrhage.—If the hæmorrhage is *vicarious*, as in females when bleeding from the nose or stomach takes the place of the *menstrual* discharge, the treatment should be directed to the establishment of the healthy monthly period.

CAUTION.—As before suggested, the general and medicinal

hints here given are chiefly intended for cases of emergency; and the patient should be placed as quickly as possible under the care of a homœopathic physician.

ACCESSORY MEASURES.—Calmness and judgment are necessary, as the discharge of considerable quantities of blood is otherwise likely to cause such alarm, both in the patient and his friends, as to unfit them for carrying out those prudent measures that are essential for the safety and even life of the sufferer. The patient should immediately lie down on a sofa or mattress, with the head and shoulders elevated: all tight-fitting clothes should be removed or loosened, and coolness and quiet of the body maintained, and talking on no account be permitted. There must be no crowding around, no noise or confusion, and the room be kept cool and airy, at about 55° Fahr. No food is for some time admissible, and the only drink that can be allowed is a little cold water, or small pieces of ice to suck. Should faintness occur, no alarm need be excited, because, as before stated, it is often nature's method of arresting the bleeding. After the hæmorrhage has ceased, the patient must still be kept cool and quiet, and the diet be light and unstimulating, while the position of the body should be such as to favour the efflux of blood from the bleeding organ. These measures are necessary to obviate a recurrence of the symptoms.

3.—Hæmaturia (*Bleeding from the urinary organs*).

The sources of the hæmorrhage may be the kidneys, the bladder, the prostate gland, or the urethra.

CAUSES.—Hæmorrhage from the kidneys may be due to the irritation of renal calculi; blows on the loins; *congestion*, from scarlet fever, inflammation, typhus, scurvy, etc. Hæmorrhage from the prostate gland, bladder, or urethra, may be caused by the introduction of instruments, the irritation

of stone, venereal disease, abuse of Spanish fly, or by the existence of an ulcer or tumour, of which, indeed, it is often the first manifestation.

DIAGNOSIS.—Hæmorrhage from the bladder may be recognised by the discharge taking place principally *after* the escape of urine; the quantity of blood is also greater, and often the clots are larger and more irregular, than when derived from the kidneys; the severe pain in the lumbar region, the intimate admixture of the blood with the urine, and other symptoms that accompany hæmorrhage from the kidney, are not present.

TREATMENT.—*Canth.*, *Terebin.*, *Cann.*, *Mex.*, *Arn.*, *Lyc.*, *Carbo Veg.*, *Acon.*

Cantharis.—Discharge of pure blood in drops, or copiously blended with the urine, especially when associated with difficulty in passing water, scalding urine, and spasmodic pains in the region of the bowels. A dose every hour repeated once or twice; afterwards twice a day.

Camphor.—If the disease has arisen from the use of Spanish fly (*Cantharides*), after the allopathic fashion of administering that poison.

Arnica.—Hæmorrhage from external violence, strains, or severe efforts. If the patient is robust, and inflammatory symptoms predominate, *Aconitum* may be alternated with this remedy. A dose every hour for several times; afterwards *Arnica* alone, every four or six hours.

ACCESSORY MEANS.—Demulcent drinks, such as linseed-tea, gum-water, etc., may be taken in considerable quantities. The cold compress, covered with oiled-silk, over the loins, if the hæmorrhage proceeds from the kidneys, or over the whole region of the bladder, if the bleeding proceeds from that organ, will mitigate the pain, and favour a more rapid cure.

For additional details of treatment, consult the sections,

“Inflammation of the Kidneys,” pages 272–4; “Inflammation of the Bladder,” pages 274–5; “Inflammation of the Urethra, pages 280–4.

4.—Menorrhagia (*Hæmorrhage from the womb and vagina*)—**Flooding.**

This may occur under such various conditions, many of which are of such an intricate character as to be quite unintelligible to non-professional readers; indeed, it would require a considerable treatise to describe the various functional and organic derangements of the womb of which hæmorrhage is but a symptom. We will therefore only suggest such remedies and measures, to be used until medical aid can be obtained, as are most likely to be immediately beneficial, without prescribing for the removal of the cause of the hæmorrhage.

TREATMENT.—*Acon.*, *Sec.*, *Croc.*, *Ipec.*, *Bell.*, *Puls.*, *Chin.*, *Calc.*, *Sulph.*

Aconitum.—Heat and feverishness, at the commencement of the discharge, or when the first symptoms are present. A dose every hour for several times; afterwards, one of the annexed.

Ipecacuanha.—Copious flooding, and when the discharge is *bright-red*.

Secale.—Dark and offensive discharge, increased by movement or coughing; loss of contractive power in the uterine fibres; pale face, coldness of the extremities, extreme weakness.

Arnica.—Either alone or in alternation with *Acon.*, when the hæmorrhage follows a fall, strain, mis-step, or mechanical injury.

Ignatia.—Hæmorrhage with hysteria.

ACCESSORY MEANS.—The patient should lie down quietly on a hard mattress, and move as little as possible; the mind

to be kept calm, and order and quietness maintained in the apartment.

For ampler details of treatment, see "The Lady's Homœopathic Manual," article, "Menstruation too profuse."

5.—Bleeding from the Rectum.

See "HÆMORRHOIDS," pages 263–7; and "DYSENTERY," pages 234–8.

6.—Hæmorrhagic Diathesis.

In some patients a predisposition to hæmorrhage exists which appears to be hereditary, and is designated the *hæmorrhagic diathesis*. In this condition there is, probably, defective contractility of the arteries, which may also be fragile or soft from diseased processes, and so are unable to resist the forces of the circulation, especially in congestion; also loss of coagulability of blood, from a defective or altered character of the *fibrine*, the chief agent in coagulation, and some change in the red corpuscles. This diathesis is marked by a tendency to ecchymosis from slight pressure, bleeding of the nose, or gums in children, or from the urinary passages or bowels in subsequent years. Hence the most trivial wound, as the extraction of a tooth, or the laceration of a blood-vessel, bleeds almost uncontrollably, and even life may be jeopardized by a slight injury or surgical operation. The hæmorrhagic diatheses may not in all cases be hereditary, but caused by diseases of internal organs, such as the liver and spleen, which exert a deleterious influence upon the constituents of the blood. The knowledge of the existence of such a diathesis is most important, as it would materially modify the medical and surgical treatment of the patient.

CHAPTER XVI.

SCROFULOUS DISEASES.

1.—Scrofula—Struma (*Tuberculosis*).

SCROFULA or STRUMA—for the terms are synonymous—is a disease of the constitution, consisting of debility with a tendency to indolent inflammatory and ulcerative affections. It is a congenital disease, consisting probably of chronic irritation, disturbing the functions by which the proper nourishment of the tissues in foetal life is carried on, and leading afterwards to derangement of the nutritive system. Indolence is a marked peculiarity of scrofulous diseases; they begin insidiously, progress slowly, are attended with little heat or pain, but often proceed to the disorganization of the part affected, by the deposit of *tubercle* and subsequent suppuration. The most common external sign of scrofula is enlargement of the subcutaneous glands, especially those of the neck. These swellings occur very frequently during childhood, and are excited into activity by cold, measles, scarlatina, hooping-cough, etc., and either remain for a long time inoperative, or proceed to severe inflammation and suppuration. Not that all enlargements of the lymphatic vessels and glands are due to scrofula; they may arise from temporary causes, and their character as such is readily determined by the history and symptoms of the case.

The blood of scrofulous patients is found, on examination, to differ materially from that of healthy persons. In the former, there is an excess of serum, but a deficiency of the fibrous constituent; consequently, the materials which are formed from this blood are lax, feeble, and incapable of resisting exposure, fatigue, and morbid influences.

TUBERCULOSIS signifies that state of the constitution in which there is a tendency to the deposit of a substance called *tubercle*, in various tissues or organs. It is at present uncertain whether scrofula and tuberculosis are different diseases or not; but it is highly probable that the disease of the blood which leads to the deposit of tubercle, and that which gives the specific character to scrofulous affections, are identical.

CAUSES.—The *Predisposing* causes are—descent from scrofulous parents, who may undoubtedly transmit their peculiar organization and predisposition to disease to their children; children of syphilitic parents, and still more, of spirit drinkers, are very liable to scrofula. Two other potent causes of scrofula, as also of consumption, hydrocephalus, etc., have been pointed out by Dr. Piddock; they are, *tobacco-smoking* on the part of the father, and the existence of *leucorrhœal discharge* on that of the mother. To both of these we would draw special attention.

Indulgence in tobacco-smoking, more especially when the habit becomes frequent and inveterate, or where it has been acquired early in life, is, it is believed, a fruitful cause of struma. The pale, sallow complexion, the frequently disordered digestive functions, and the debilitated or consumptive frames of many young fathers in the present day, attest the pernicious tendency of the habit in question.

Leucorrhœal, hæmorrhagic, or other uterine and vaginal discharges, often generate scrofula in the foetus during utero-gestation, which declares itself during infancy in convulsions, hydrocephalus, mesenteric disease, or at or after puberty, by tubercular consumption. No observant medical man can doubt the influence of these causes as tending largely to the production of disease.

The scrofulous habit, if not congenital, may probably be produced by any cause capable, directly or indirectly, of

lowering the vital energies, such as poverty and wretchedness ; meagre, watery, or insufficient food ; neglect of healthy exercise ; insufficient clothing ; want of cleanliness ; frequent exposure to cold and damp ; and, especially, want of pure air and sunlight.

Respecting the *Exciting causes* of scrofula, it may be remarked that the habit may be so intense, that the patient is attacked with some of the diseases mentioned in this chapter as peculiar to it, in spite of all care ; or, on the other hand, actual scrofulous disease may not appear unless the health is first depressed by some other cause, such as measles or scarlatina.

Dietetic transgressions, and anything that causes derangement of the digestive organs, may excite it into activity. It rarely breaks out before two or after thirty years of age ; still it may be called into action at any period of life, by any cause which injures the general health. The time of the second dentition and puberty are perilous periods.

The climate of Great Britain has often been charged as a fruitful cause of scrofula, but it is probable that it has no more influence in causing it than any other. It is certain that persons whose occupation necessitates their exposure to the weather at all hours of the day, and in all seasons of the year, are not nearly so liable to scrofulous disease, other things being equal, as persons whose occupations are sedentary, and carried on in close, hot, dark, or badly ventilated rooms. Pure air and sunlight often make amends for defects of food and clothing.

SCROFULOUS DISEASES.—The most marked local lesions of this constitutional cachexia are, *glandular swellings*, and indurations on the neck below the jaws, on the nape of the neck, then in the *axillæ* (armpits), groins, and afterwards in any part of the body. These swellings are at first soft, *painless*, movable ; afterwards, they enlarge, become painful,

inflammation, and eventually suppurate, forming scrofulous ulcers. They may also occur in the interior of the body, particularly in the mesentery and lungs; also in the liver, spleen, and brain. The eyes are also frequently in a state of inflammation, described in another part of this work as "Scrofulous Ophthalmia." Cutaneous diseases; tetters; otorrhœa; a large and tumid abdomen; swellings and caries of bones; white swellings (*anthrocace*), and the hip disease; ozoëna; diseases of the testicle and mammary gland; and convulsions and acute hydrocephalus during infancy.

TUBERCLE.—This is a peculiar substance, and is usually found in the form of roundish masses, and hence called *tubercle*, or else is infiltrated through the substance of various organs. So far as its naked-eye appearances are concerned, it is met with in two forms, namely, (1) as a miliary tubercle, varying in size from that of a pin's head to that of a small pea; greyish, semi-transparent, and tolerably firm; or (2) of *yellow* tubercle, of a dull yellow colour and cheesy consistence.

Tubercles are incapable of development into any of the normal tissues of the body, and either remain quiescent, or wither, or are partly absorbed; or again degenerate into harmless masses of granular, oily, and earthy matter, and may so remain till the end of life. This is called *cretification*, and is the most favourable course of tubercle. In unfavourable cases tubercles soften, first at their centre; then inflammatory infiltration takes place at the circumference, and pus is formed, which is discharged by ulceration along with the softened tubercles. This process is too often attended with an increase of the tubercular deposit around, which rapidly undergoes the same destructive change, until the organ affected be destroyed, and, if this be a vital organ, with it the life of the individual. If the lungs are the organs implicated, the disease is called *phthisis pulmonalis* or

consumption; if the mesenteric glands, *tabes mesenterica* or *marasmus*; if the meninges of the brain, *hydrocephalus* or “*water in the head*.” Tubercle is usually deposited slowly, painlessly, and unsuspectedly, during some period of defective health, and may continue in this condition for an indefinite period, till it wastes, if the health improves, or softens and causes abscesses if the health deteriorates. In many cases, after this, the deposit may be arrested by proper treatment; under other circumstances, it goes on to a fatal termination.

TREATMENT.—This is generally tedious, often requiring to be continued for months, and in some cases for years. As it is often desirable to persevere with one remedy for a long period, it is necessary occasionally to suspend its use for a few days, then to administer a dose or two of an intercurrent medicine, such as *Sulphur* or *Opium*; and again, after waiting a few days, to resume the former remedy. The following list includes most of the remedies that have been found successful in treating scrofula in its various forms:—*Sulph.*, *Calc.*, *Bar. C.*, *Sep.*, *Lyc.*, *Phos.*, *Coni.*, *Hep. S.*, *Sil.*, *Aur. Mur.*, *Iod.*, *Merc.*, *Ferrum*, *Cina*, *Bell.*, *Acon.*, *China*.

Calcare.—In children presenting the usual marks of the scrofulous diathesis, especially in *ricketty affections*, *curvature* of the spine, or other bones; *softening of the bones*; indurated or suppurating glands; *scrofulous ophthalmia*; late or difficult dentition; scrofulous eruptions on the skin; voracious appetite; *emaciation*; chronic diarrhoea. It is also indicated in the case of girls in whom the menstrual function appears too early, and the discharge is too copious. *Calcare* is often efficacious after *Hep. S.*, *Sulph.*, and *Merc.*, have failed to do good.

Arsenicum.—This is one of the most important remedial agents in scrofula, particularly when there is *atrophy* or *marasmus*; when debility is very marked, and the patient is

troubled with *burning* dryness of the throat and tongue, pale and unhealthy skin, frequent and exhausting discharge from the bowels, sallow complexion, and *emaciation*.

Aurum.—Often of great service in cases improperly treated with large doses of *Mercury*; also in protracted and obstinate cases, when the strength of the patient is much reduced, and little benefit has resulted from previous remedies. It is chiefly indicated in *affection of the bones*, and in *ricketty patients*. *Ferrum* and *China* are deserving attention in like cases.

Belladonna.—This remedy is often useful when sensitive organs are affected, such as the eye, the ear, and the throat: there exist heat, redness, and pain in the eye, with great intolerance of light; roaring or neuralgic pain in the ears; soreness of the throat, rendering swallowing difficult; painful swelling of the parotid and other glands; pains in the limbs and joints, increased by movement, and during the night; swollen and spongy gums, etc.

Silicea.—Scrofulous ulcers with callous edges, fistulous ulcers, scaldhead, discharge from the ears, and in scrofulous affections of the bones. It may advantageously follow *Calcareo*, especially in disease of the bones.

Mercurius.—Glandular inflammations characterised by a diffused redness, much swelling, and pains worse at night in bed; it is particularly indicated when the glands of the neck are swollen and painful, and there are excessive discharge of saliva, disagreeable taste, frequent and unhealthy-looking stools, and strumous affections of the eyes.

Hepar Sulph.—Scrofulous glands in a state of suppuration, the discharge being indolent or unhealthy, and the patient frequently troubled with cold in the head or chest.

Sepia.—This remedy is often required in scrofulous females, who are troubled with menstrual irregularities, corrosive leucorrhœa, indurations of the uterus, etc.

Phosphorus.—Scrofulous patients with affections of the chest—cough, dyspnoea, general emaciation, etc.

Bryonia may often follow this remedy with advantage, especially if the person is troubled with indigestion and confined bowels.

Iodine.—This is an excellent remedy in enlargement of the glands, scrofulous inflammation of the knee, rough, dry skin, enlarged mesenteric glands, enlarged and tender abdomen, and emaciated appearance, with hectic fever.

Baryta Carb.—Painful glandular swellings; *tinea capitis*, scrofulous affections of the ears with throbbing, itching, and discharge of purulent matter; liability to sore throat after every cold; enlargement of the liver, testes, or mam-mæ; disease of the mesenteric glands in children, etc.

Sulphur.—An unhealthy condition of the skin; scrofulous ophthalmia of children; humid eruptions behind the ears; purulent discharge from the ears; swelling of the axillary glands, tonsils, nose, or upper lip; swelling of the knee, hip, or other joints; defective nutrition; colicky pains, mucous discharges, etc.

ADMINISTRATION.—In acute cases, every four or six hours; in chronic, morning and night.

ACCESSORY MEANS.—These are of the greatest importance, but are only briefly pointed out here, as they are more fully dwelt upon in the chapter on *Phthisis*, to which the reader is referred.

Food.—The food of scrofulous patients should always be of the most nutritious character, light and digestible. Beef, mutton, venison, and fowls, are the best kind of animal food; to these should be added a due quantity of bread, mealy potatoes, rice and other farinaceous principles, as more suited to this class of patients than very watery and succulent vegetables. Preparations of eggs and milk; and if they can be taken without causing feverishness or drowsiness, a small quantity of beer or wine to promote digestion.

Cod-liver Oil, as a supplemental article of diet, is an agent possessing such remarkable properties of arresting general or local emaciation, so well known as not to require further recommendation here. It may be taken in almost any scrofulous disease, and in any case in which the patient is losing flesh; it may be given in teaspoonful doses, two or three times a day, commencing even with half a teaspoonful if it is found to disagree with the patient. See also pages 184-5.

Exercise.—Moderate exercise in the open air is most essential; and in carrying out this suggestion the patient should endeavour to take exercise with the mind agreeably occupied, rather than following it as an irksome task. A bracing mountain or sea air, if it can be borne, is the best. The patient's room should also be uninterruptedly supplied with pure air. *Bathing*, both in fresh and salt water, is invaluable, as a means of promoting a healthy action of the skin, and of imparting tone to the whole system. The *clothing* should be adapted to the season, and should be warm without being uncomfortable. The extremities, especially in cold weather, should be kept warm. As a general rule, flannel* should be worn, but only during the day; in winter it affords direct warmth, and in summer it tends to neutralize the effects of sudden changes of temperature. The linen should be frequently changed, always observing that it is put on perfectly *dry*.

PREVENTION.—The prevention of strumous diseases consists not alone in the hygienic or medical treatment of the patients, but primarily in the correction of the habits and improving the health of the parents, more particularly in respect to the two points referred to under "Causes." The habit of tobacco smoking, especially by men under forty, should be repressed, as it tends to poison life at its source,

* See pages 26-7.

the consequences not exhausting themselves on the smoker himself, but are transmitted in full force to his offspring, who are often weak, strumous, or otherwise unhealthy.

No less important on the part of the female is the cure of any leucorrhœal discharge. If this exist immediately before or during pregnancy, pure air and a suitable diet will often be quite ineffective in preventing the development of scrofulous or tuberculous disease in the child. Children born of women long troubled with leucorrhœa have often been observed to die early, and after the cure of that disease healthy children have been borne.

2.—Rickets (*Rachitis*).

DEFINITION.—Rickets is a cachectic disease of childhood, essentially characterised by deficiency of earthy matter in the bones, so that they yield to weight and pressure, and are liable to harden afterwards in unnatural forms. There are also the conditions which result from impaired assimilation—emaciation and general debility.

SYMPTOMS.—Rickets is generally attended with the usual symptoms of the scrofulous diathesis, such as are described in the last section; but its leading characteristics are the imperfect development, atrophy, softening, and deformity of the bones, especially those of the lower extremities. These are soft, and consist of cartilaginous tissue, which will bend without breaking, and through which a knife may be readily passed. According to Messrs. Tomes and De Morgan, rickety bone has the structural arrangement of the bone without the impregnation with earthy salts. The articular extremities of the bones are often disproportionately large. The shafts are unable to support the weight of the body without bending. In slight cases, the ankles may be *only* a little sunk, or the shins bent, or the spine curved:

but, in aggravated cases, the physiognomy and general appearance are very peculiar. The stature is stunted; the head large, with a protuberant forehead; the fontanelles are slow in closing; the face small and triangular, with a very sharp-peaked chin, and projecting teeth; the chest narrow and prominent in front, whence the vulgar term, *pigeon-breasted*; the spine variously curved; the pelvis small, the promontory of the sacrum and acetabula being pressed together, rendering the cavity perilously small for child-bearing; frequently the long bones are involved, so that the limbs are crooked, their natural curves being exaggerated. This disease generally attacks the children of the poor, from the second to the tenth or twelfth year of their age—(*Druitt*).

CAUSES.—Hereditary scrofulous disposition of the constitution. It is frequently met with in the children of parents who have suffered from syphilis, sexual excesses, unhealthy occupations, or other unfavourable conditions. It, however, often arises in children of healthy parents from the non-observance of hygienic laws, and especially from insufficient or improper food, want of pure air and bright sunlight. It being strictly a disease of the nutritive processes, it will readily be perceived how such conditions as the above should tend to produce it. Dr. Jenner, in the following passage, strikingly shows the influence of improper *feeding and physicking* of children in the production of rickets.

“For the first two or three days after birth, their tender stomachs are deranged by brown sugar and butter, castor-oil and dill-water, gruel and starch-water; as soon as the mother’s milk flows, they are, when awake, kept constantly at the breast. And well for them if they are not again and again castor-oiled, and dill-watered, and even treated with mercurials—for the poor have learned the omnipotent virtues of *grey-powder*.

“After the first month, bread and water sweetened with brown sugar is given several times a day, and during the night the child is, when not too soundly asleep, constantly at the breast. As soon as the little ill-used

creature can sit erect on its mother's arm, it has at parents' meal-times 'a little of what we have'—meat, potatoes, red herring, fried liver, bacon, pork, and even cheese and beer daily, and cakes, raw fruits, and trash of the most unwholesome quality, as special treats, or provocatives to eat, when its stomach rejects its ordinary diet. Then, instead of being weaned when from ten to twelve months old, the child is kept at the breast when the milk is worse than useless, to the injury of the mother's health, and to the damage of its after brothers and sisters, in the hopes that thus keeping it at the breast may retard the next pregnancy. The children are sacrificed that the passions of the parents may not be restrained" (*Medical Times and Gazette*, May 12th, 1860).

CONSEQUENCES OF RICKETS.—Softening and curvature of the bones often deprive a child of the use of his limbs, so that he may be generally seen seated or lying on the floor, thus adding to the original mischief. The deformity of the thorax produces difficult breathing, and the abdominal organs, especially the liver, are constantly compressed in consequence of sedentary habits. Sometimes the enlarged bones inflame, leading to local swelling, suppuration, and caries. Derangement of the digestive organs, wasting, hectic fever, etc., now make their appearance, if they did not exist before. If the disease do not terminate fatally by exhausting the patient's strength, it may lead to malformation of the bones, which may be a cause of miscarriage, unnatural labour, etc. Under favourable treatment, however, and with proper care, the bones become very firm in adult life, and are remarkably strengthened by strong ridges developed on their concave sides.

TREATMENT.—The medicines required may be selected from those prescribed in the section on *Scrofula*. The leading remedies are the following:—*Hep. Sulph.*, *Calc. C.*, *Silic.*, *Ars.*, *Iod.*, and *Phos. Ac.*

ACCESSORY MEANS.—Country, out-of-door air, abundance of sunlight, and exercise suitable to the case, will wonderfully aid the cure, by imparting tone to the digestive organs,

energy to the nervous system, and, in short, invigorating the whole constitution. Patients not able to walk should sit or recline in the open air, warmly clad, during suitable portions of the day, when not exposed to cold or damp winds. This will be found far more contributory to recovery than passing the chief part of the day in the confined air of a sick-room. Further, tepid and cold bathing, especially in sea-water; and nourishing food, which should be well masticated, or if the teeth are inefficient, pounded in a mortar; the food should include milk, meat, good animal broths, and cod-liver oil. Respecting mechanical support, Mr. J. C. Forster remarks: "I am quite sure none yet invented is of any service. Splints on the outside and inside of the leg, boots, irons, etc., only add to the weight which already overburdens the feeble limb."

3.—*Tabes Mesenterica*—Abdominal Consumption.

NATURE.—To connect the intestines, and to support them in their proper place in the abdomen, they are suspended by folds or duplicatures of the *peritoneum*, which are arranged in such a manner as to allow the necessary freedom of motion to these organs, and to enclose and protect the *mesenteric glands* and chyle-producing vessels, as they carry on the important functions of nutrition. *Tabes mesenterica* is a strumous degeneration of the mesenteric glands, which, unless arrested by early and judicious treatment, may result in the destruction of these glands, and, consequently, in the death of the patient, from inability to repair the waste of the tissues of the body.

SYMPTOMS.—The abdomen is tense and swollen, while the other parts of the body and the limbs waste, until, in fatal cases, the degree of emaciation becomes extreme; hence the term *tabes* (to melt away). Co-existing with wasting there

are also the following symptoms:—pale and flabby skin; anxious and aged expression; inordinate or fitful appetite; irregular, but generally relaxation of the bowels, with unhealthy, foetid stools; passage of undigested food; pain in the bowels, so that the patient draws his legs up towards the abdomen; at the same time he becomes feverish and indisposed to activity. When the disease is established, the process of absorption is suspended, so that the quantity of nutriment added to the blood is inadequate to the requirements of the system. At an advanced stage of the disease, hectic fever often sets in, with obstinate diarrhoea, extreme thirst, restlessness, and sleeplessness. The mesenteric glands, which can often be felt through the tense and thin walls of the abdomen, sometimes suppurate, and the patient dies from the abdominal disease, or from actual starvation. If, however, treatment is resorted to before the glands are irreparably disorganized, the patient slowly recovers.

TREATMENT.—The remedies required in this affection are the same as those recommended in the section on *Scrofula*, a selection from which should be made according to the existing symptoms. The most important are, *Acon.*, *Calc.*, *Arsen.*, *Iod.*, *Bell.*, *Merc.*, *Sil.*, *Phos.*, and *Sulph.*

The only hope of cure is in early and judicious treatment; the disease, however, is so serious, that it can only be safely confided to a Homœopathic practitioner.

ACCESSORY MEANS.—The food should be *nourishing* and suited to the age and digestive functions of the patient. In general, farinaceous preparations, goats' milk, beef-tea, soda-water with milk, and, twice a day, a small teaspoonful of cod-liver oil. Pure out-of-door air, and in the case of children in towns, country-air or sea-air is invaluable. At the same time the patient's apartment should be spacious and carefully ventilated. Further, tepid salt-water bathing,

warm clothing, including a flannel bandage round the abdomen, so as to guard against the vicissitudes of the weather, are necessary adjuncts to the treatment of patients.

4.—Scrofulous Disease of the Hip-Joint (*Morbus Coxæ*).

SYMPTOMS.—In this slow and serious disease, the early symptoms are of an insidious character. The child is supposed to be suffering from “growing pains” for months before the disease assumes an active form. The first distinctive symptoms are, slight pain, chiefly referred to the knee, lameness, and weariness. There may be even slight swelling in the knee-joint, so that remedies are often applied here, but the disease is in the hip. This may be proved by pressing either in front or back of the hip-joint, or by jerking the thigh-bone against the joint, as by a sharp tap on the heel, when pain will be felt in the hip. As the disease progresses, the *nates* (buttock) wastes and becomes flabby; the limb is shortened either by caries of the neck of the *femur* (thigh-bone), or by destruction of the ligaments of the joint, and consequent dislocation of the joint upwards on the *dorsum ilii*. There is increased fulness about the limb, the pains increase in severity, especially at night, and there are often startings of the limb during sleep; abscesses form, and afterwards burst on the nates or groin, or burrow deeply and discharge their contents into the rectum. The duration of the disease varies from two or three months to several years. But it is much modified, both as to its duration and results, by recent skilful contrivances. Adults rarely recover; but, in children, when the strength is not too much exhausted, and the lungs are unaffected, the disease frequently terminates in *anchylosis* (stiff joint).

TREATMENT.—The medicines most likely to prove beneficial

are *Acon.*, *Bell.*, and *Ara.*, in the early stage of the disease. *Calc.*, *Silic.*, and *Phos.*, when abscesses have formed and suppuration is established.

ACCESSORY TREATMENT.—REST, with the limb in a straight position, to which it is necessary to add a long splint and bandages, not only to render the rest as complete as possible, but also to prevent *articular pressure* from muscular contraction. An extension splint is now used by Mr. Barwell, which, after the acute inflammatory action has subsided, may be so applied as to enable the patient to walk about, thus improving the appetite and general health, and enabling the constitution the better to overcome the disease. The recumbent position must, however, be retained sufficiently long, till, aided by the splint, the patient may be able to walk a little without much difficulty. This principle of rest in joint-disease has “received some additional support from recent lectures at the College of Surgeons; but I must point out that rest for a diseased joint consists of two separate conditions—absence of movement and absence of articular pressure, the latter being, I believe, the more important element. The school of surgery to which I have just referred insisted upon the former portion with unswerving rigidity, but left the latter quite unnoticed. Under such treatment, and by such school, hip-disease has been deemed incurable. A different view of the sort of rest chiefly necessary, leading to another, and I firmly believe to a more reasonable practice, has shown me that hip-disease, although a somewhat refractory, is quite a manageable malady.”*

The *diet* should be nourishing, and include cod-liver oil, and if the discharge is considerable, good wine is necessary. Pure air, and especially residence by the sea-side, will expedite the cure.

* Barwell's “Lectures on Hip-joint Disease,” *Lancet*, November 7th, 1863.

CHAPTER XVII.

GENERAL DISEASES.

1.—Acute Rheumatism—Rheumatic Fever.

DEFINITION.—A specific febrile disorder, accompanied by acute inflammation of the white fibrous structures of one or several of the large joints, the ligaments, the tendons, the sheaths of tendons, aponeuroses, fasciæ, etc., being chiefly attacked. The local symptoms are very erratic; the skin of the affected part is covered with a copious sour, sticking perspiration, and contains lactic acid; and the blood has a large excess of fibrine, probably to the extent of thrice the normal quantity.

SYMPTOMS.—Acute rheumatism is usually ushered in with febrile disturbances, followed by the local attack of inflammation of the fibrous structures about one or more of the larger joints—the shoulder, elbow, knee, ankle, the fibrous covering of the valves of the heart, and the sac of the pericardium, etc. Exposed joints appear to be more prone to attacks than those that are covered, the larger more frequently than the smaller, and the small joints of the hands more frequently than those of the feet. Sprained or otherwise injured joints are particularly liable to suffer. The general febrile condition often precedes the local inflammation one or two days; sometimes the general and local symptoms occur simultaneously, while in others the inflammation of the joints precedes the febrile condition. The affected joints are swollen, tense, surrounded by a rose-coloured blush, and acutely painful. Pain is a more constant symptom than swelling, and swelling than redness. The pain of rheumatism has many degrees of intensity, is generally intermittent, abates somewhat in the day, but is aggravated at

night, and in all cases is increased by pressure, so that even the touch of his medical attendant or nurse, or the weight of his bedclothes can scarcely be borne. Often the patient remains fixed, as it were, in one posture, from which he dares not move, and declares that he has lost the use of the limb. The skin is hot, but covered with a sour sweat, having an offensive odour, and so highly acid as to redden litmus paper. The perspirations, although unattended by immediate relief, are nature's mode of elimination, for the pains are always aggravated, and the constitutional symptoms intensified, if they become suppressed. It is only when the perspirations lose their characteristic *sour* character that they become useless. The *urine* in acute rheumatism is scanty, of high specific gravity, and deposits on cooling deep-coloured sediments of urates. The pulse is round and full; the tongue loaded with a yellowish-white mucus, but the head is unaffected. This last symptom, the absence of headache or delirium, is a prominent distinguishing point between acute rheumatism and the continued fevers.

"Such are the general and local expressions of a diseased state of the system in acute rheumatism; and at the height of the disorder it is difficult to conceive a more complete picture of helplessness and suffering than that to which the patient is reduced. A strong and powerful man, generally unused to disease, lies on his back motionless, unable to raise his hand to wipe the drops which flow fast from his brow in the paroxysms of pain, or the mucus which irritates his nostril. Indeed, he is so helpless that he is not only obliged to be fed, but to be assisted at every operation of nature. The sweat in which he lies drenched seems to bring him no relief; his position admits of no change; if he sleeps, it is short, and he wakes up with an exacerbation of suffering which renders him fretful, impatient, and discontented with all around him" (*Aitken*).

The *erratic* character of rheumatism is very remarkable, and is usually well expressed; thus it suddenly quits one joint to appear in another, and then in another, afterwards,

perhaps, travelling back to its original seat, the development of inflammation in one joint being often accompanied by its rapid subsidence in another, this alternation occurring many times during an attack. But the most serious metastasis is from the joint structures to other fibrous tissues, as the pericardium or the valves of the heart. This complication may be expected in very severe attacks, in young persons, in women oftener than in men, in patients who have been weakened by disease or other causes, and in persons troubled with irritability or palpitation of the heart.

HEART-COMPLICATIONS.—When cardiac inflammation arises, the patient's countenance becomes dreadfully anxious, the breathing distressed, and pain is complained of in the heart's region; also there is tenderness between and under the ribs, and there may be palpitation or irregular action of the heart. The physical *signs* of *pericarditis* may be detected by the stethoscope, and a distinct friction or *to-and-fro* sound heard, like the rubbing of paper, owing to the roughening of the serous surfaces by effusion of fibrine. This sound may soon be lost, either from the opposite surfaces becoming glued together, or separated by serous effusion. If the amount of effusion is large, both the circulation and the respiration become seriously embarrassed, the heart beats tumultuously, the sounds become muffled, and there is increased extent of dulness in the heart's region.

Together with pericarditis, or separately, *endocarditis* (inflammation of the inside lining of the heart, especially of the valves) may arise. The *symptoms* are similar to those of pericarditis, but the physical *sign* is a *bruit* (a modification or an unnatural character of one or both of the natural sounds of the heart). In consequence of the extreme danger of these complications all cases of severe rheumatic fever should be watched daily by a medical man, so that the signs and symptoms of heart complications, which often come on

very insidiously, may be early recognised, and appropriate treatment at once adopted.

RHEUMATISM AND GOUT.—For a tabular statement of the differences between these diseases, see the section on “Gout.”

CAUSES.—The *predisposing* cause is some morbid product in the blood, a product probably of unhealthy assimilation. “The circulating blood carries with it a poisonous material, which by virtue of some mutual or elective affinity falls upon the fibrous tissues in particular, visiting them and quitting them with a variableness that resembles caprice, but is ruled, no doubt, by definite laws, to us, as yet, unknown” (*Watson*). These *materies morbi* with which the blood is loaded, constitute that predisposing cause without which it is probable the disease would never occur. Hereditary predisposition exists undoubtedly in many persons. The suppression of an eruption or rash, as measles, or the sudden stoppage of dysentery, may also act as a predisposing cause.

The *exciting* causes are, exposure to cold and wet, especially *evaporation* from wet or damp clothes, causing chill. This is no doubt an explanation why the disease is most common among the poorer classes of society, who cannot protect themselves so effectually as their wealthier brethren. The cold probably excites an attack of acute rheumatism, by arresting the secretory functions of the skin, by means of which, in health, morbid substances in the blood are often removed; now, however, the functions of the skin being deranged, unhealthy principles accumulate in the blood, and rheumatism results. Mere cold, however, is not so much a cause of rheumatism as extreme atmospheric vicissitudes. Hence it is found that it does not prevail most, abstractedly, in the coldest regions of the globe, but rather in those climates and during those seasons remarkable for *damp* and changeable weather.

TREATMENT.—*Aconitum*.—Acute rheumatism, at the commencement, *when the fever is high*, and there are violent shooting or tearing pains, worse at night, and aggravated by touch. Also swelling and redness of the affected parts, impaired appetite, high-coloured urine, and other febrile symptoms. This remedy may be administered either alone or in alternation with *Bry.*, at intervals of one to three hours.

Bryonia is most frequently required after the use of *Aconitum*, or in the absence of acute fever, it may be the first remedy used. It is chiefly indicated when the pains are lancinating or stitching, and seem to affect the muscles rather than the bones; are worse on *the least movement*, but are relieved by rest; there also exist heat, headache and gastric derangement, profuse perspiration, or coldness and shivering, and irritability of temper. It is the most useful remedy when the joints are attacked, but it is frequently necessary to change the remedy to *Rhus*, if the tendons become implicated.

Rhus Tox.—Rigidity of the limbs, deep tearing or wrenching pains, *worse when at rest*, or on first moving the limb, and in cold or damp weather, but *relieved by motion*. It is suited to rheumatism from getting wet.

Pulsatilla.—Rheumatic pains *wandering* from one part to another, and *relieved by cold*. There is a sensation of torpor or paralysis in the affected part; also generally pale face, tendency to relaxation, and amiable temper.

Nux Vomica.—The pains are similar to those of *Pulsatilla*, but occur in persons of a dark complexion, hasty temper, with a tendency to confined bowels, piles, etc.

Arnica.—Pains resembling those caused by a *bruise* or *sprain*; and when the rheumatism affects the back, and causes stiffness, or affects parts previously injured.

Belladonna.—Shooting, burning pains, worse at night, and

on movement, with shining redness of the parts, congestion to the head, etc. Often required alternately with *Aconitum*.

Mercurius.—Puffy swelling of the affected parts; the pains feel as if seated in the bones or joints, and are increased by warmth, and at night; there are also chills, and *profuse perspiration*, which do not give relief.

Hepar Sulphur.—Tedious cases, after other remedies have been tried with little or no effect; also for patients who have been salivated with mercury.

Dulcamara.—Rheumatism from exposure to damp or wet, or after the sudden cessation of an eruption or discharge, worse at night, or while at rest, and when there is but little fever.

Nitric Acid is often very successful both in the acute and chronic variety of the disease. Its chief indications are, severe drawing and lacerating pains over the whole body; or chiefly affecting the joints, bones, and the upper and lower extremities. The joints are weak, very sensitive, and feel as if bruised, especially after exertion. The pains are increased by cold or damp air; and there are trembling and numb sensations in the limbs.

Sulphur.—Either before the above remedies, or after them, to complete the cure and prevent obstinate sequelæ; also as an intercurrent remedy. It is especially useful in rheumatism from hereditary taint, and when it follows repelled eruptions; also when the pains are drawing and tearing, *worse when cold*, and *better when warm*.

ACCESSORY MEANS.—During the fever the patient should remain in bed, and the diet be mainly restricted to water, milk-and-water, barley-water, gruel, and arrow-root, at least at first; afterwards beef-tea, mutton-broth, etc. *Hydropathic treatment* in the early stages of the disease is highly beneficial. Warm baths, hot-air baths, or hot compresses, are both useful and comforting. *Spongio-piline*,

made into gloves or caps for the hands, feet, elbows, or knees, or shaped to cover any large surface, is an excellent substance for conveying moisture to the parts. The spongy surface should be moistened with the fluid, and every few hours re-moistened. *Wet-packings*, repeated as often as the fever returns, enveloping the joints which are most implicated, or even the whole body, with several folds of wet linen, are most useful adjuncts. Except, however, when the skin is *hot and dry*, *cold* applications are contra-indicated. They might, indeed, subdue local inflammation in the knee or elbow; but from the migratory character of the disorder, great risk would be incurred of repelling the poison into the circulating fluid, to settle possibly upon the heart or other internal part. But no danger of this character belongs to warm fomentations, or to hot compresses, which often afford great relief to the patient.

Blankets in Rheumatism.—An invaluable adjunct to the measures already suggested is that of enveloping the patient in blankets and flannel. “Bedding in blankets reduces by a good three-fourths the risk of inflammation of the heart run by patients in rheumatic fever, diminishes the intensity of the inflammation when it does occur, and diminishes still further the danger of death by that or any other lesion; and at the same time it does not protract the convalescence” (*Chambers*).

2.—Chronic Rheumatism.

This is sometimes a sequel of the acute form of rheumatism; at other times it is a separate constitutional affection, coming on quite independently of any previous attack. It is generally very obstinate and prone to recur. In time, the affected limbs lose their power of motion, and lameness results, the knee-joint being often affected; sometimes there is emaciation of the muscles; sometimes permanent contrac-

tion of a limb, or bony stiffness of the joint. There is but little febrile disorder, no perspirations and less swelling than in acute rheumatism.

VARIETIES.—Rheumatism is variously described according to the parts implicated. When the sheaths of the fleshy mass of muscles on one or both sides of the loins are affected, and the pain is increased by movement of the back, or by pressure, it is called **LUMBAGO**. When the neurilemma of the sciatic nerve, in its course along the thigh to the knee, or even to the foot, **SCIATICA**. When the sheaths of the muscles of the neck, **CRICK IN THE NECK**. When the fibrous fascia of the intercostal muscles, **PLEURODYNE**. When the valvular apparatus of the heart, **ENDOCARDITIS**. When the sac which encloses the heart, **PERICARDITIS**.

RHEUMATISM AND MUSCULAR WEAKNESS.—The diagnosis of chronic rheumatism, though generally easy, may sometimes be mistaken for painful muscular affections following prolonged or excessive exertion, or soreness or stiffness, which occurs during convalescence from any long illness, or accompany general debility from any other cause. These affections are generally better in the morning, after the repose of the night, but increase with fatigue; and the pain in the affected part is mitigated by relaxing or supporting it. The diagnosis is important, especially to medical men, because if we fail to prescribe appropriate medicines, nourishing diet, and proper rest and support to the weak muscles until they regain their tone, we shall fail to benefit the patient, who possibly, as Dr. Tanner remarks, in his contempt for medicine, will hasten to try the good diet and pure air of some hydropathic establishment, and then circulate reports of his extraordinary cure, “after having been given over by the faculty.”

TREATMENT.—In the treatment of chronic rheumatism, *Dr. Baikie* suggests to the writer that high dilutions of the

remedies selected should be used, and adds that in his practice they have been most successful. The chief remedies are—*Bry.*, *Rhus*, *Led.*, *Caust.*, *Dulc.*, *Hep. Sulph.*, *Lyc.*, *Phos.*, *Silic.*, *Rhus Rad.*, *Sulph.*

Rhus Tox.—In general, this is the most useful remedy in chronic rheumatism, especially if worse in bed and at rest.

Bryonia.—Rarely useful except during febrile exacerbations.

Pulsatilla.—When it shifts, is better in cool air, and if there is acidity and disorder of the stomach.

Ledum.—A valuable remedy when the painful parts are constantly cold. It should be used in a high dilution.

Sulphur is always necessary in long-standing cases. Like the last, in a high dilution.

Arnica.—Rheumatism affecting a part which has been sprained or bruised.

Causticum.—When the joints are stiff and the fingers contracted.

ACCESSORY MEANS.—Patients who are much afflicted with this complaint, and who are in a position to do so, should reside in a warm, dry climate. At any rate such patients should wear flannel and other warm clothing, and protect themselves against atmospheric changes. Shoes and boots should have soles sufficiently thick to protect the feet from cold and damp. Wet compresses over the joints specially attacked are always useful. Sometimes warm baths, especially of salt water, or vapour, or hot-air, will be found very serviceable. To these means may be added friction with *Liniments*, especially when medicated with *Arnica*, *Rhus Tox.*, or whatever remedy is taken internally. One more point necessary to refer to is the *diet*, which should be easy of digestion, as attacks are often occasioned by disorder of the digestive organs.

3.—Lumbago—Pains in the Loins.

See under “Chronic Rheumatism,” page 461.

TREATMENT.—*Rhus Tox.*—Chronic lumbago; pains worse during repose and at night; lumbago from getting wet.

Bryonia.—Intense pains, causing the patient to walk stooping, increased by movement or a draught of air, with shivering or biliousness.

Lycopodium.—Pains felt mostly on stooping; rheumatic drawing pains in the small of the back.

Arnica.—From over-lifting, a sprain, or a blow on the loins.

ACCESSORY MEANS.—*Liniments*, medicated with the same remedy as administered internally, rubbed into the affected parts, are very useful. A *wet compress*, in all varieties of lumbago, greatly assists the cure.

4.—Sciatica.

DEFINITION.—Severe pain in the region of the hip-joint, extending along the course of the great sciatic nerve to the ham, and even to the foot, the neurilemma of that nerve being affected. It is of most frequent occurrence from forty to sixty years of age, and its attacks often alternate with other forms of rheumatism or neuralgia.

TREATMENT.—*Coloc.*, *Merc.*, *Rhus*, *Nux V.*, *Ign.*, *Ars.*, *Cham.*, *Acon.*

Colocynth.—Sciatica in the acute stage.

Rhus Tox.—Chronic sciatica.

See also under “Chronic Rheumatism.”

5.—Gout (*Podagra*).

DEFINITION.—A specific form of inflammation in which the first joint of the great toe is first and chiefly affected, usually occurring in paroxysms at longer or shorter intervals,

and accompanied with uric acid in the blood, and the deposit of urate of soda in the affected tissues.

SYMPTOMS.—An acute attack of gout is often preceded by an excessive debauch, or by over-fatigue, impairing the digestive powers, its onset commonly commencing an hour or two after midnight, when indigestion from a supper or late dinner arises at its acme. Ordinarily a patient retires to rest in his accustomed health, but awakes early in the morning with severe pain, chiefly in the metatarso-phalangeal joint of the great toe, which on examination is found red, hot, swollen, and so exquisitely tender that the mere weight of the bed-clothes is intolerable, and the vibration of a heavy footfall in his room causes great discomfort. The veins proceeding from the toe become turgid with blood, and surrounded with more or less œdema. On the first accession of the pain there is generally cold shivering, which gradually subsides as the pain increases, and is followed by symptomatic fever. The patient is perpetually shifting his foot from place to place, and from posture to posture, change of place giving no relief. At length, if suitable precautions are taken, and the foot kept in a horizontal posture, the pains subside in the early part of the day; but at evening an exacerbation takes place which persists during most of the night, and subsides again towards morning, when he falls asleep in a gentle perspiration. Sometimes the pains remit so suddenly that the patient attributes the relief to his having at last found an easy posture. The same series of symptoms recur, in a less severe form, for some days and nights, varying considerably in different cases, and greatly influenced by the treatment adopted; and then the attack passes off, not to return for one, two, or after a first attack, perhaps for three years. After the lapse of years, however, the intervals between the attacks are liable to diminish until the patient can scarcely ever calculate upon being free. The

joints of the fingers and toes become enlarged and disorganized by deposit within and without the synovial cavity of a white saline matter, commonly called "chalk stones," but really *urate of soda*.

It is not uncommon, even in a first attack of gout, for both great toes to be implicated, mostly alternately, the inflammation rapidly subsiding in one joint to appear in the other, but sometimes simultaneously. In many instances, after the first attacks, other joints, the instep, ankle, the heel, or the knee are affected at the same time; in rarer cases, some joints of the upper extremities.

SYMPTOMS PRECEDING AN ATTACK.—Flatulence, heartburn, acidity, and other symptoms of indigestion are often present, and the bowels are either relaxed or confined. In some patients the function of breathing is implicated, or the liver deranged; in others the nervous system is implicated, or there may be palpitation, alteration of the urinary secretion, or a crampy condition of the muscles. Such symptoms are no doubt consequent on the altered state of the blood which always exists prior to the development of a regular fit of gout. Should any organ or function be implicated to a very marked degree, it is then termed *irregular gout*.

CHALK-STONE DEPOSITS.—The original condition of these deposits is that of a liquid, rendered more or less milky or opalescent from the presence of acicular crystals; as the fluid part is absorbed, the consistence becomes creamy, and at last a solid concretion is produced. When the effusion is confined to the cartilages, unless very excessive, the injury to the mobility of the joint is comparatively slight; but when the ligaments are infiltrated, they are made rigid, and the play of the parts is consequently seriously interfered with. If a bursa has been infiltrated, the resulting chalk-stone is free and of uniform composition, but the distortion is con-

siderable. The visible occurrence of chalk-stones is not constant, but when external deposits do occur in any patient, no possible doubt can exist as to the nature of the case, for, as the deposition of urate of soda in the tissues occurs only in gout, its presence constitutes a pathognomonic sign (*Garrod*).

CAUSES.—Gout may be hereditary, or it may be acquired. The experience of physicians largely engaged in treating the disease, proves that more than half the gouty patients can trace the disease to hereditary influence; and if the wealthy portion of the community were only considered, the proportion would be much greater. Large-built men, of a full and luxurious mode of life, particularly if addicted to indulgence in *wine* and *malt liquor*, and too much animal food, combined with too little exercise, are very liable to the disease, whether a predisposition has been transmitted or not. That wine and malt liquor have a greater tendency to the production of gout than distilled spirits is proved by its prevalence in those countries or cities in which these beverages are largely consumed, and its absence where distilled spirits are almost exclusively made use of. Thus gout is more frequent in London, where porter and beer are largely partaken of, than in Edinburgh, where the favourite beverage is whiskey. Gout is very common amongst brewers' men; also amongst ballast men employed on the Thames, who often drink from *two to three gallons of porter daily*.* *Port-wine* has a marked reputation, and probably justly,

* "Observant men are now inclined to discard the doctrine which teaches the noble origin of gout, and its necessary association with high mental development. The disease is now certainly common and plebian, as well as aristocratic. It may have been, in the days of Sydenham, that the gouty patients of a physician were to be found amongst '*magni reges, dynastæ exercituum, classiumque duces, philosophi, alique his similes*.' Now-a-days it is no less certain that the physician, in London at least, must pay his visits and prescribe for gout amongst 'the London labour,' as well as among 'the London poor.' And his list will number 'coal-heavers, bakers, brewers, draymen, house-painters, butchers, innkeepers, publicans, butlers, coachmen, and porters in wealthy families especially'" (*Aitken*).

for causing gout; and sherry is by no means so harmless a beverage as many suppose. It is chiefly a disease of the *male* sex, although occasionally women of a robust and plethoric habit suffer with it, after the cessation of the catamenial function. That luxurious living and an inactive life are at least exciting causes of gout seems evident from the exemption of working people in rural districts from the disease. Even when the disease does occur in poor people it is chiefly in persons who have previously lived fully and inactively, such as the servants of wealthy families—butlers, coachmen, etc.,—men who often live more luxuriously and idly than their masters.

On the other hand, unless the gouty diathesis be very strong, its actual manifestation may be averted. Let the son of a rich gouty nobleman take the place of a farm servant, and earn his temperate meal by daily toil, and very likely he will wholly escape a visitation of the malady. Probably the operation of this cause explains how it is that gout leaps over one generation, while the predisposition descends through those who have never actually had the disease.

The influence of *lead* in the production of gout Dr. Garrod believes to be considerable; he has observed that a large per centage of the gouty patients that come under his care in hospital practice consisted of painters, plumbers, or other workers in lead, forcing him to the conclusion that the influence of this form of metallic impregnation in inducing gout is considerable.

Among the *exciting causes* of gout may be mentioned *indigestion*, especially that form of it which favours the production of an excessive amount of acidity in the system, causing a less alkaline state of the blood, and so tending to the insolubility and deposition of the urate of soda in the tissues. During an attack of gout, uric acid is said to be

absent from the urine, the kidneys not excreting it; hence it collects in the blood, and in the serum may be detected by the microscope in minute crystals upon threads immersed in it, after the addition of a little hydrochloric acid.

The influence of *season and climate* has much to do in exciting a paroxysm of gout. First attacks are much more common in spring; as the disease becomes more confirmed, an autumnal seizure is added; after the lapse of a long time, a fit may occur at any season, and at most irregular intervals.

DIFFERENCES BETWEEN GOUT AND RHEUMATISM.

GOUT.

1. In the earlier attacks, the *small joints* are affected, the metatarsal joint of the great toe being chiefly implicated.

2. Rarely occurs *before* puberty, and generally not till from 35 to 50 years of age.

3. Is more frequent in *men* than women, and in the latter rarely till after the cessation of the menstrual function.

4. Is often the punishment of an *idle* and luxurious life.

5. Is strongly *hereditary*.

6. Is associated with *chalk-stones* (urate of soda) in the external ear, on the tops of the fingers, or other situations.

RHEUMATISM.

1. The *large joints* are chiefly implicated, several being affected at the same time.

2. Generally *occurs in the young*, from 20 to 30 years of age, and often earlier.

3. Affects *men and women* equally.

4. Is the lot of the *poor*, the hard-working, the exposed, and the ill-clad.

5. Is but *slightly* hereditary.

6. Is *never* associated with chalk-stones.

TREATMENT.—Although medicines would be most unwisely resorted to if they were used *as substitutes* for temperate and active habits, yet they are often extremely useful in improving the digestive organs, and by a persevering use of some of the medicines in our *Materia Medica* we may strike deeply at the foundation of the malady, and go far towards eliminating the poison from the system.

CLASSIFIED CASES OF GOUT.—

1. *Inflammatory attacks*.—Acon., Colch., Bry., Arn., Puls., Nux V., Led. Pal., Rhus.

2. *With gastric symptoms*.—Ant. Crud., Puls., Bry., Cocc., Merc.

3. *Confined to the great toe*.—Led. Pal.

4. *Retrocedent* (moving about).—Colch., Puls., Carb. Veg., Ars., Sulph.

5. *Chronic*.—Nit. Ac., Arn., Lyc., Iod., Coni., Zinc., Sil., Sulph.

6. *Obstinate cases*.—Aur., Graph., Mag. Carb.

7. *Gouty concretions*.—Mez., Calc. Carb., Ant. Crud., Phos., Ferr., Sep., Staph.

Aconitum.—Generally at the commencement of an attack, and whenever febrile symptoms are prominent. It is generally suited to stout persons.

Arnica.—Soreness, or pains as if the parts were sprained, bruised, or dislocated.

Arsenicum.—Tearing and burning pains, worse at night and in the cold, but relieved by warmth; anguish and restlessness; a small, quick pulse; palpitation, with swelling and stiffness of the joints.

Bryonia.—This is often a valuable remedy, and is chiefly indicated when bitter taste, yellow-coated tongue, eructations, confined bowels, and other symptoms of indigestion precede an attack. The affected part is red, swollen, and pits on pressure, and the pains are stinging, burning, and aggravated by movement and contact. The patient complains of coldness and shivering, alternating with febrile flushes of heat, and is often very irritable.

Nux Vomica.—Accession or aggravation of the symptoms towards morning, especially in patients of sedentary habits, hasty temper, and fond of the pleasures of the table, an attack often following indulgence in wine, or hearty, indi-

gestible suppers or late dinners; confined bowels, spasms, piles, etc., are additional indications.

Pulsatilla.—*Wandering pains*, especially when those dyspeptic symptoms and characteristics exist, for which this remedy is suited.

Antimonium Crud.—Gastric derangements, white-coated tongue, nausea, and increase of the pains after eating; gouty nodes.

Rhus Tox.—Stiffness and pain in the joints, chiefly felt on first moving the joint after rest, or on waking in the morning. It is indicated in low (typhoid) inflammatory conditions, *Acon.* being required when the symptoms are *acutely* inflammatory.

Administration.—In acute attacks, a dose may be administered every one to three hours; in chronic, twice or thrice daily.

For further symptoms and other remedies, consult the article on "Rheumatism," as remedies possessing a curative action in that disease will be found useful in gout.

ACCESSORY MEASURES.—In acute attacks, the patient should be restricted to farinaceous diet—arrowroot, tapioca, sago, bread, etc., and milk; water, or toast-and-water, *ad libitum*. As the febrile symptoms decline, a more generous diet may be gradually allowed; at the same time, the patient should resume daily moderate out-of-door exercise as early as he is able. Flannels wrung out of hot water, hot bread-and-water poultices, or *spongio-piline*, after immersion in hot water, often do good. The general treatment should be the same as pointed out under "Inflammatory Fever," pages 55–6.

PREVENTIVE TREATMENT.—To prevent subsequent attacks of gout, or to diminish their frequency or severity, the following suggestions should be acted upon, and will often prove efficient.

1st. *A well-chosen diet*. This should include both animal

and vegetable food, of such quality and in such quantities that the stomach can easily digest, and that will, at the same time, furnish materials sufficient to nourish the patient, and out of which pure blood can be formed. White fish, soles, whiting, and codfish; mutton, tender beef, fowl, and game may be partaken of with advantage. Salmon, veal, pork, cheese, and highly-seasoned dishes, are unsuitable. The consumption of animal food should be moderate, and the tendency to acidity of the stomach guarded against by avoiding pastry, greasy or twice-cooked meat, raw vegetables, "made dishes," highly-spiced food, and anything likely to lead the patient to eat more than is strictly moderate. The wines most likely to injure are port, sherry, and madeira. If wine is taken at all, probably good claret, free from sugar, and without acidity, is best. If gout attacks a patient early, entire abstinence from all alcoholic beverages is one of the most likely measures for checking the future progress of the malady. Aged persons, however, and others whose health has been much enfeebled, may be allowed a small quantity of stimulants, such as the particular circumstances of each case seem to justify. For "although a plan can be sketched out which may apply to the majority of cases of gout, still each case not only exhibits its own peculiarities, and becomes a separate study, but likewise demands, in certain respects, a separate treatment" (*Garrod*).

2nd. *Healthy action of the skin*.—This should be promoted by bathing, warm clothing, Baden towels, bath brushes, etc., for much excrementitious matter is got rid of in this manner. Friction over the whole surface of the body is extremely useful when exercise cannot be taken. The patient should be well rubbed with a flesh-brush, or with the hands, twice a day.

3rd. *Good habits*.—A life of indolence should be exchanged for one of activity and usefulness. Exercise

should be *regularly* taken, but not of a severe or exhausting nature. Walking exercise, so as to secure an abundance of fresh air, must ever be considered the best, but it may be conjoined, if agreeable, with riding on horseback. Without sufficient walking or horseback exercise, probably every other measure will be unavailing. Early and regular hours should be adopted; and too severe or prolonged mental application avoided. In some cases, removal during the winter and spring to a warm and dry climate may ward off subsequent attacks.*

6.—Neuralgia—Tic Douloureux.

DEFINITION.—Violent pain in the trunk or branches of a nerve, which recurs in paroxysms, at regular or irregular intervals, and is probably due to some morbid condition of the nerves of sensation.

VARIETIES.—When the branches of the fifth pair of nerves are the seat of neuralgia, it is recognised under the name, *tic douloureux* (*neuralgia facia*); when its location is in the nerves of the stomach, *gastrodinia*; when certain nerves about the head, *hemicrania* or *brom-ague*; when the cardiac nerves, *angina pectoris*; when the sciatic nerves, *sciatica*, etc. Of all the varieties of this affection, the one described as *tic douloureux*, or *trifacial* neuralgia, is the most frequent.

SYMPTOMS.—Darting or shooting pain in the course of a nerve, of different degrees of intensity, at times almost unendurable; the severe form generally comes on suddenly, and is of a sharp, darting, or tearing character, coursing along the trunk or ramifications of the affected nerve. Sometimes there is spasm in the muscles that are supplied by the nerve thus affected; in others, heat and redness of

* For the fuller consideration of this disease, the reader is referred to *Sir Thomas Watson's Lectures*, *Dr. Aitken's Science and Practice of Medicine*, and Dr. Garrod's article in *Reynolds' System of Medicine*, to which the author is much indebted.

the surface, with augmented secretion from the neighbouring organs, as a flow of saliva or tears when the nerves of the jaw or eyes are implicated; at other times the parts in immediate connection with the diseased nerve are unaffected. The duration of neuralgia is very uncertain; an attack may pass off after a few paroxysms, or it may persist for many days or months, with a well-marked, or irregular, intermittent, or remittent character.

CAUSES.—The causes of neuralgia are very various, and may be local or constitutional. 1. *Local causes* are those which act upon the nerve that is the seat of pain. Thus, neuralgia may be produced by wounds and other injuries; by tumours, especially cancer; by spicula of bone pressing on the nerve (a frequent cause of facial neuralgia); carious teeth or stumps; or by some disease of the brain or spinal cord at its origin. 2. *Constitutional causes* are, loss of blood and consequent debility; a gouty, rheumatic, or syphilitic taint; wet and cold; irritation of the skin from eruptions or wounds; carious teeth; diseases of the alimentary or urinary organs; lastly, *malaria*, when, like other diseases arising from that cause, it is generally *intermittent*. But all intermittent neuralgia is not necessarily caused by malaria; for this, as well as other nervous affections, may occur only at stated periods, although caused by a local source of irritation that is permanent (*Druitt*).

Defective health is a frequent cause of neuralgia. Every observant medical man knows, that unless the result of mechanical pressure, or other local cause, neuralgia seldom occurs in strong and healthy persons, impairment of the general health standing in the relation of cause to this disease. *Depressing influences*, whether mental or physical, exposure to atmospheric vicissitudes, exhausting disease, anæmia, etc., often lead to severe neuralgic affections. The great majority of patients are found among the hard-working, poor, and the badly-nourished classes.

TREATMENT.—In many cases, this must be both local and general. The first includes the detection, and if possible the removal of any source of local irritation affecting the nerve, either at its source or in any part of its course. A careful and professional examination is generally necessary. The second includes the medicinal and general measures afterwards pointed out. A clue to the treatment may be gathered from the causes, for as these are various, it cannot be expected that any single drug, or any one plan of treatment, will always be effective.

Neuralgia of the face: Coloc., Spig., Bell., Staph., Acon., Ars.

Neuralgia supra-orbitalis (brow-ague): Chin., Ars., Carbo Veg.

Neuralgia of the heart: Spig., Cactus Grand., Dig., Acon., Bell.

Neuralgia of the stomach: Bell., Nux V., Verat., Bry., Coloc.

Neuralgia of the womb: Plat., Bell., Puls., Ign.

From loss of animal fluids: Chin., Ars., Phos., Calc.

With scrofula, disease of the bones, etc.: Aur., Hep. Sulph., Coni., Calc., Sulph.

From syphilis: Merc., Nit. Ac., Aur., Mezereum.

Rheumatic neuralgia: Coloc., Acon., Bry., Rhus, Arn., Caus., Sulph.

From mechanical injuries: Arn., Acon.

Intermittent neuralgia: Chin., or Quinine.

The annexed indications may further aid in the selection of the appropriate remedies.

Arsenicum.—A debilitated and exhausted appearance, with emaciation, trembling of the limbs, coldness of the extremities, small pulse, etc.; the pains are burning or tearing, and occur particularly in the forehead over the root of the nose, over the left eye, in one side of the face, or in one eye, and

are aggravated by the slightest movement or touch, and at night or during repose, and are relieved by the application of heat.

The judicious employment of this potent mineral is often attended with the most marked success in neuralgic affections. The homœopathic law, indeed, leads us to expect that it would be so, for immoderate doses of *arsenic* are a cause of neuralgia. Persons who have attempted to poison themselves with that mineral are said to suffer often excruciating pains along the course of the nerves of the limbs.

Colocynthis.—Severe paroxysms of rending or darting pains, chiefly on the left side of the face, or certain parts of the left side of the body; the lancinations are sudden, violent, and extend from the point of origin to a distance, especially to the ears, temples, nose, teeth, and all parts of the head. It is more particularly indicated in neuralgia from cold, vexation, anger, etc.

Belladonna.—The appearance strongly contrasts with that described under *Arsenicum*, the habit being full or plethoric, with red or swollen cheeks; and there are spasms or startings in different parts of the body; headache aggravated by noise, light, or movement; acute throbbing pains in the forehead; pains darting from the side of the face to the teeth and ears; lancinating pains in the thigh, or in the leg, extending to the sole of the foot; neuralgic pains in the back and shoulders. The patient is irritable, with a tendency to delirium; firm pressure affords relief, but slight touches increase the pains.

Spigelia.—Violent neuralgic pains, of a jerking, tearing, or burning nature, on one side of the face, chiefly the right, increased by touch or movement of the affected part, with anguish and general agitation.

Bryonia.—Drawing and lacerating pains, particularly in patients of a rheumatic diathesis; aggravation of the symp-

toms by moving the affected parts; irascible and passionate disposition, with a tendency to chilliness, etc.

Staphysagria.—Neuralgia originating in a *carious tooth*, and thence radiating over the whole jaw.

Nux Vomica.—Drawing, tearing pains, affecting the whole head; toothache affecting various teeth, the pains extending to the face and temples; *gastrodynia* with violent cramp-like pain in the stomach; cramps in the hands, limbs, and feet; languor and indisposition to mental and physical exertion. It is chiefly suited to neuralgia in persons addicted to intoxicating beverages, or who lead a sedentary life, or are exercised in too much mental labour. It is generally more suited to males than to females; in the case of the latter, and in persons of a mild or timid disposition, *Pulsatilla* is often more appropriate.

Aconitum.—Congestion to the head, chest, or heart; throbbing pain so severe as almost to drive the patient to despair. It is especially indicated if the heart seems to be implicated, and may be followed or alternated with *Spigelia*.

EXTERNAL APPLICATIONS.—When the pain is excessively severe, and does not yield promptly to internal remedies, the writer has sometimes employed, with immediate good results, an *Aconite lotion*, prepared by adding about a dozen drops of the strong tincture of *Aconitum* to four table-spoonsful of water. It may be applied hot or cold, as is most agreeable to the patient, by means of two or three folds of linen squeezed out of the lotion.

Administration.—To be successful in the treatment of this disease a variety of attenuations may have to be used to suit particular cases. The doses may be repeated every thirty to sixty minutes for several times, lengthening the intervals as the pain diminishes.

ACCESSORY MEANS.—These must include, if possible, *the removal of the cause of the disease*, for so long as that exists

we cannot expect more than a temporary palliation of the symptoms. If the consequence of debility, salt-water bathing, the cold-douche, or sponging, followed by friction, or the manipulations of a clever *shampooer*, with moderate and regular out-of-door exercise, will be of essential service. Warm baths, or holding the head over steam, during a paroxysm of facial neuralgia, often afford instant relief. The *diet* should be plain and nourishing, and the meals taken at regular hours. The *clothing* should be warm, and include *flannel*. Neuralgia is often associated with dyspepsia, and any derangement of the digestive functions may occasion an attack. Exposure to damp or cold, sudden change of temperature or clothing are most unfavourable. A change of air, and sometimes entire change of habit, are necessary to ensure a cure. It need scarcely be added, that the attempt to cure neuralgia by *division of the affected nerve* is both an unscientific and useless proceeding.

7.—Old Age and Senile Decay.

A BRIEF reference to the changes and dissolution of that beautiful and wondrous structure—man's material frame—will form an appropriate conclusion to this portion of our work.

The decay of nature is gradual, and does not affect all the structures of the body equally at the same period; it also begins in some at a comparatively early period, and in others not until a considerably advanced stage of life. As illustrations of the changes attendant upon old age, and which exercise an important influence in accelerating that final one which is the common lot of humanity, we may note the following:—

I. THE BONES.—As old age advances, these undergo very characteristic changes. In infancy and childhood the *animal element* predominates; hence we can explain why the bones

are then so pliant and fracture so rare, except the variety appositely described as *green-stick fracture*. In adult life, the relative proportions of bone may be approximately stated as consisting of one-third of animal and two-thirds of earthy matter. In advanced age, these proportions vary considerably, the earthy matter being now in excess. This alteration in their composition renders the bones extremely brittle, and liable to fracture from trifling accidents. Fractures are then more oblique and comminuted, and also more inapt to unite firmly again, than those occurring at an earlier age. Illustrations of the liability of the bones of the aged to break, and of their indisposition to unite, are familiar to every surgeon. The neck of the *femur* (thigh-bone) becomes more horizontal and atrophied, and, as a consequence, liable to intracapsular fracture. The skull becomes thin from absorption of diploe.

II. THE MUSCLES.—The minute cells, aggregated together in the form of fibres, of which the muscles of the body are composed, are rapidly destroyed by the contraction of the muscles; but in vigorous life, by the digestion and assimilation of food, are as rapidly reproduced. In old age, on the contrary, the disintegrated cell-tissue is but tardily repaired, and the muscles become soft, flabby, and pale, from an insufficient supply of blood; they are consequently unequal to severe or protracted exertion; muscular debility is easily excited, and the strength but slowly and imperfectly restored. The tendinous portions of the muscles are also liable to earthy deposits in them; thus their resisting forces become weakened, and they are in constant danger of rupture if subjected to any undue tax.

III. THE HEART.—Another most important and frequent change is one that takes place in the textures of the central organ of circulation. The heart becomes weakened from senile softening and degeneration of its muscular structures into a fatty tissue; its pulsations are thus rendered less and

less efficient to propel the blood to the extremities. The blood failing to complete its circuit, the hands and feet become cold as the blood leaves them, the decline of temperature gradually extending to the central organs of the body. This reduced power of the heart, with the disposition to atheromatous deposits in the coats of the blood-vessels, referred to in the next paragraph, with subsequent ossification of the valves of the heart, is one of the most common changes attendant upon old age, and also the most fatal. These changes as they proceed are generally hidden and painless. The first indication of such degeneration of structure may be, but is not necessarily, the proclamation of immediately disastrous results.

IV. THE BLOOD-VESSELS.—In the silent progress of years the arterial system is liable to undergo changes which are subversive in the highest degree to the performance of its essential functions. The arteries gradually become converted into ossific or bony patches of greater or less extent, and often so considerable as to lead to changes of a vital character by destroying the elasticity of the arterial tubes, and deranging the circulation of the blood in the parts to which they conduct. Thus the nutrition of the body is impaired, and the functions of the nervous and muscular systems are only imperfectly performed. Further, the ossific patches in the coats of the arteries may become causes of aneurism, gangrene, rupture of blood-vessels, apoplexy, etc., forms of disease to which the aged are very liable. Apoplexy, due to this cause, is one of the most frequent causes of death in old age. The cerebral arteries become diseased, and as the blood is driven into them they give way. Even thin persons, whose blood-vessels and heart are diseased, die from apoplexy.

V. THE VERTEBRÆ.—The changes in the spinal column are very considerable; they not only alter the external form,

but often derange the functions of the great organs of the body. The three graceful curves in the spine, so exquisitely arranged, both to give space and protection to the internal viscera, and for the transmission of the weight of the head and trunk in the line of gravity, become more or less obliterated in advanced life, and the centre of gravity disturbed. The vertebral column also loses its *elasticity*; the disc of cartilage placed between each vertebra, to break the force of shocks and prevent jarring of the brain, partly disappears or ossifies; the mobility of the spine is likewise diminished, and thus a false step or a trifling accident may be converted into an occurrence of grave importance. The alteration in the curves of the spine produced by the above causes, gives that change to the *external form* which is so characteristic of old age. Corresponding with these changes in the spine, as affecting the external form, are others which affect the bones generally. Owing to the diminished size of the muscles, and the absorption of fat from beneath the skin, points of bone in various parts become more angular and prominent, and the limbs lose that graceful and rotund form which was the pride of earlier years.

VI. THE EYES, ETC.—The special senses, as those of sight and hearing, frequently, and sometimes at a comparatively early period, give evidence of approaching decay. The *arcus senilis*, a circumferential opacity of the cornea, resulting from fatty degeneration, and generally associated with a like degeneration of the heart, is, as its name implies, an affection incident to the aged. *Cataract*, opacity of the crystalline lens, or its capsule, or both, seems to be the consequence of impaired nutrition, and is met with in elderly persons only, except as the result of inflammation or injury. But the most frequent cause of impaired or perverted vision is alteration in the form of the lenticular bodies of the eye—the cornea and the lens—which, losing

their natural convexity, interfere with the correct impression on the retina at the proper fixed point of the object of vision.

Defective hearing is another not infrequent attendant upon old age, and may result from various causes, the most frequent being impairment of the acoustic nerve.

GRADUAL DECAY.—The varied forms of man's decay are gradual and progressive. Death may take place suddenly from *heart disease*; but it was only its termination, not the disease, that was sudden. For years before the fatal issue the organ had been undergoing degeneration of structure, until at last it ceased to beat. Death from *apoplexy* is sudden; but it hardly need be stated, that long before the blood-vessel gave way in the brain a process of decay had been going on which led to the result. *Rupture* of an *aneurism*, or other similar immediate causes of death, are but terminations of structural changes which had probably been in progress for years. Death under such circumstances has been compared to the fall of some towering cliffs, which crush everything beneath. The catastrophe is terrible, and occurs unexpectedly; but it was the slow disintegration during many preceding winters' frosts that hurled it down the steep. Sudden death is a misnomer in language, except as it takes place from accident or poison.

In alluding to the decay of nature, we may add that we refer to that which is not "to be measured by number of years." It is well known that some persons at fifty, or even earlier, are in this respect older and more shattered in constitution than others who have attained to the age of seventy or upwards. Probably as the result of improved sanitary measures, a more correct and general recognition of the laws of health, and of the rapid spread of homœopathy, the attainment of a vigorous old age without the premature feebleness and decay hitherto so generally observed, will be of much more frequent occurrence.

TREATMENT OF THE AGED.—There are many ailments peculiar to the approach of old age which require special medical treatment, or the application of particular measures, which we cannot enlarge upon here, but in which the timely use of appropriate remedies, and the prompt employment of judicious means, are often rewarded in seeing the flickering flame rekindled, and valuable life considerably prolonged. On two or three points only can we make general observations.

1. **FOOD.**—Food should be of a much less solid form than during the vigour of adult life. Just as nature provides fluid food during infancy before the teeth appear, so the loss of teeth, a common attendant upon old age, necessitates a return to a form of food which does not require mastication. Inattention to this point is, we believe, one of the most fruitful causes of the impaired digestion, weakness, and sufferings of the aged. The stomach cannot deal with food except in a state of minute division; hence we find the introduction of imperfectly-masticated food leads to serious derangements of the alimentary canal, and general defective nutrition. In some instances the skill of the dentist furnishes the aged with the means of mastication. Frequently, however, artificial teeth cannot be tolerated, and the only path of safety lies in the adoption of an almost exclusive fluid diet. We may be permitted to add, we have met with many cases in which our advice on this point has been carried out with the most beneficial results.

2. **REST.**—This is essential to the health and safety of the fragile frame of the aged. The sports and exercises of youth, or the exertions of maturer age, would fracture the bones, rupture the tendinous portions of the muscles, or occasion a blood-vessel to give way. To the aged, long-continued exercise, and too little or broken rest, are highly unfavourable, the reparative processes being only slowly

performed. Happily the activities and athletic exercises of youth become distasteful, and the burdens of mid-day life are transferred to the succeeding generation, and he now seeks and enjoys a condition of quiet and repose necessary to the well-being of his fragile structures.

3. WARMTH.—In the winter season, when sudden changes of temperature are frequent, provision should be made for preventing the ingress of the cold night-air, and for maintaining a suitable temperature in the bed-room throughout the whole night. The temperature of the sleeping apartment should be kept at 60° to 62° , and measured by a thermometer, as the sensations of persons are not a sufficient guide. A thermometer should therefore be kept in every house, and suspended out of a current of air, and beyond the direct influence of the fire, so that the facts which it registers may be accurately observed and attentively studied. It no doubt often happens that the lonely encounter with death takes place in the stillness of the night-season, from a sudden access of cold air, which the extreme feebleness of old age could not resist or endure. Very cold weather seriously affects the aged, and it is a fact that excites frequent observation, that soon after the setting in of intense cold the obituaries of persons in advanced life become unusually numerous in the public papers. “An aged man, with a sluggish heart, goes to bed in a temperature, say of 50° to 55° ; in his sleep, were it quite uninfluenced from without, his heart and his breathing would naturally decline. Gradually, as the night advances, the low wave of heat steals over the sleeper, and the air he was breathing at 55° falls and falls to 40° , or it may be 35° or 30° . What may naturally follow less than a deeper sleep? Is it not natural that the sleep so profound shall stop the labouring heart? Certainly. The great narcotic never travels without fastening on some victims in this wise, removing them, imperceptibly

to themselves, into absolute rest, inertia, until life recommences out of death" (*Richardson*).

With a regulated temperature in his apartment, heat-producing kinds of food, such as an enlightened physician would suggest, warm clothing, and other kindred measures, should be adopted in the treatment of the aged.

4. MEDICINES.—On this point we can offer no definite suggestions. The selection of remedies must be determined strictly according to the symptoms of the disease the patient may be suffering from, modified by any idiosyncrasy of constitution that may have been noticed.

Thus the physical frame decays and man passes away, death terminating the journey of life and the traveller welcoming the long repose as he had often welcomed sleep after the fatigues of the day. We have reason to believe that the phenomenon of dying is as painless as that of falling asleep. Thus persons who have been resuscitated after drowning, and after all sensation had been lost, have asserted that they experienced no pain. What is often spoken of as the *agony of death* is probably purely automatic, and therefore unfelt. The idea embodied by the poet in the following lines is literally true—

“Passing through nature to eternity,
The sense of death is most in apprehension.”

There is thus beneficence in man's decline just as in his growth and maturity, and there is also design. The Christian philosopher not only submits with resignation to the decay of his material form, but rejoices in the assured hope that so perfect a structure, teeming with evidences of beneficent design, and so highly endowed, has not been constructed merely to rise, flourish, and then to disappear without a future grand result, commensurate with so costly an expenditure of wisdom and goodness. INFINITE WISDOM, which

designed and called forth man into being, would, it seems, forbid that such a creation should be comparatively vain, leaving only a dark blank as the memorial of its existence. We, therefore, infer that the dissolution of our earthly form is really but a mysterious transitional process, through which the good pass from an introductory and transient state of existence to one that is immortal.

PART III.

THE MATERIA MEDICA.

INTRODUCTORY.

WITH a few exceptions, the remedies prescribed in the present work are restricted to the fifty included in the list given, pages 46-7; most of which, in consequence of their frequent and general use, have been called *polycrests*, or many-healing remedies—medicines possessing curative powers in many diseases.

It seems proper to remark, however, that medical men of our school, as a rule, have a choice of several hundred remedies, and each probably in different forms and dilutions. Amateur practitioners, therefore, who have only a very limited choice, must not infer in cases of failure that they have exhausted the resources of our healing art, nor despair of help when the homœopathic physician can command so ample a range of appliances.

An objection is often raised against homœopathic remedies, that they differ from those of the old school in being of a much more deleterious and poisonous nature; a statement frequently held out by opponents with the view of intimidating those who cannot disprove the groundless character of the objection. Homœopathic drugs, in their crude state, differ in no respect from those used by the old school, being gathered in both cases from the surface or from the recesses of the earth. They differ, however, in this important respect,

that we only prescribe them in such forms and doses as, though found most efficient in curing disease, are not dangerous should mistake arise, or should they be unskillfully applied. On the other hand, how often has carelessness in the preparation, or inadvertence in the dose, of the medicines prescribed by our allopathic brethren, resulted in serious and even fatal consequences!

A difficulty will sometimes be experienced by the domestic practitioner in choosing between two or more remedies, the symptoms of which bear many points of resemblance; still, in nearly every instance, very characteristic differences exist, which the experienced eye will not fail to detect. Remedies which, to the superficial observer, seem identical, will be found on closer inspection to possess very distinctive features, determining, in the *ensemble* of the symptoms, the constitution, temperament, and general mode of life of the patient to which it is adapted. Indeed, it rarely happens that either of two remedies can be selected indifferently.

A prompt and successful use of the *Materia Medica* can only be attained as the result of close and persevering application; and though difficulties will surround and failures often attend first attempts, these should not deter the student. A deeper acquaintance with the remedies, and enlarged experience in using them, will enable us to be the instruments of restoring multitudes to health who need and claim our aid; and our reward will be secured in the "blessings of them who were ready to perish."

CHAPTER I

REMEDIES FOR INTERNAL USE.

I. *Aconitum Napellus* (*Monk's Hood*).*

GEOGRAPHY, HISTORY, ETC.—This plant is a native of Asia and of central Europe, and grows spontaneously in the damp and covered parts of almost every mountainous country, especially in Switzerland, Germany, and Sweden. On account of its beautiful flowers, notwithstanding its poisonous properties, *Monk's Hood* is cultivated, and grows readily in the gardens of our own land.

The English names are—*Wolfsbane*, because it is said that the huntsmen of the Alps dipped their arrows into its juice when hunting wolves; and *Monk's Hood*, because its beautiful blue flowers resembled the hood formerly worn by monks. It is supposed to be fatal to every species of animal, and it has been employed in the attempt to destroy whole armies.

PARTS USED.—The leaves, flowers, and root, prepared in the first instance as a tincture, are all used for medicine; but it is from the root that the very active preparation is made which is sometimes used as a topical application in neuralgia, toothache, sciatica, rheumatism, gout, etc.

HIGH VALUE OF ACONITUM.—It surpasses all other known remedies in its power of controlling the circulation, and triumphantly supersedes the lancet and the leech. "To enumerate the diseases for which it is suitable would be to mention the acute inflammation of every possible order and tissue of the body; and if it be not for all of these the sole remedy, it is almost always useful either previous to, or in alternation with, another remedy which has perhaps a more

* In addition to the fifty-two remedies, the properties and uses of which are described in this portion of the work, about a dozen others are occasionally prescribed in the preceding sections. It was at first proposed to append a short description of these addenda; but as the volume has already exceeded the intended limits, we shall reserve such matter for the larger edition of this manual, which will be published as early as our professional engagements will permit.

specific relation to the part affected" (*Dugeon*). Had Hahnemann's labours extended no further than the discovery and demonstration of the wide and inclusive curative power of this great remedy, it would have entitled him to the gratitude of countless myriads of his fellow-creatures in every succeeding generation. He most appropriately ranks it as first and foremost in his *Materia Medica*, not because its name begins with the first letter of the alphabet, but because of its transcendent power and extended sphere of action: he terms it a "precious plant," whose "efficacy almost amounts to a miracle." Let the sceptic in homœopathic therapeutics test its power in *acute fevers* in accordance with the directions of this manual, and he will witness a curative action such as is unknown in allopathic practice.

PROMINENT USES.—As a therapeutic agent, in the hands of a homœopathic practitioner, *Aconitum* is one of the first importance. "This medicine," says Hempel, "constitutes the back-bone, as it were, of our *Materia Medica*;" there being scarcely an acute disease in which it is not more or less required. Its physiological effect is depressing, the pulse diminishing in strength and frequency; respiration also becomes laboured and slow under its prolonged use; hence it is important to discontinue its administration when its action becomes marked. But although it may be often greatly abused, it is probably more frequently indicated than any other single remedy, especially at the commencement, and often during the course, of all feverish and inflammatory affections, marked by *pain*; a *rapid* strong *pulse*; *dry heat* of the *skin*; *chills* down the back, and general chilliness, followed by burning heats; restlessness; *scanty* and high-coloured *urine*; constipation, with aggravation of the symptoms towards night. Its reactionary effect tends to moderate and equalise the circulation, and to remove local congestion, especially when affecting mucous surfaces, and hence it has been considered the true specific in all congestive and in-

inflammatory diseases of the abdominal viscera, such as hepatitis, enteritis, dysentery, etc. Hæmorrhage from internal or external surfaces, especially of an arterial character, with full, bounding pulse, and other inflammatory symptoms.

SKIN.—*Dry, hot, and harsh condition of the skin; pricking sensation as from needles; yellow colour; itching and burning of the skin, as in erysipelas, prurigo eczema, hives, etc. In eruptive diseases, as nettle-rash, measles, scarlet-fever, and smallpox, it both moderates the fever and aids in the full development of the rash. Aconitum is well indicated in the dry, burning heat of children, or red rash on the skin, with thirst, short breathing, and tendency to start during sleep. The occurrence of perspiration on the skin after the use of this remedy marks its favourable action, and is the token for its discontinuance.*

MORAL GROUP.—Delirium preceding or attending acute inflammatory disease; mental derangements, especially of recent origin, and if occasioned by a fright, and marked by unsteadiness and vacillating ideas; anxious, complaining mood; inconsolable anguish and despair; fearful forebodings; tendency to start; sense of terror, with an appearance of imbecility.

HEAD.—Vertigo, particularly on raising or moving the head; fulness, heaviness, and piercing throbbing pain in the forehead or temples; aggravation of the pains by movement, drinking, or on rising from a recumbent posture; congestion to the head; heat and redness of the face; bilious, congestive, and apoplectic headaches; numb, swollen, or creeping sensation as from ants, in the scalp.

EYES, EARS, AND NOSE.—Acute ophthalmia, with intense shooting pains in the eyes; heat, redness, swelling, and dread of light; sparks, black spots, or mist, before the eyes; sudden attacks of blindness; dilated pupils; sees as through gauze. EARS.—Tingling and roaring in the ears; otitis; extreme sensitiveness of hearing, or intolerance of noise.

tingling; humming. **Nose.**—Pressive feeling at the root of the nose; bleeding of the nose; fluent coryza; sneezing.

RESPIRATORY GROUP.—Accelerated, anxious breathing; bronchitis, during the inflammatory stage; cough, with expectoration, thin and frothy, or streaked with blood; hooping-cough, with febrile symptoms; *pneumonia*; *pleurisy*.

HEART.—Inflammatory affections of the heart, and of the general circulatory apparatus; palpitation, especially in plethoric or sensitive persons; palpitation of a nervous origin, or as occurring during a paroxysm of hysteria; spasms of the heart, with great anguish or suffocative sensation, and accompanied with heat in the face; fainting fits; rheumatism of the heart; acute disease, or structural change in that organ.

DIGESTIVE ORGANS.—*Teeth.*—Rheumatic and congestive tooth- and face-ache, especially from exposure to cold and draughts of air; throbbing, pressing pains in the teeth or side of the face; fever attending dentition. *Jaws.*—Idiopathic, or traumatic *trismus*; numbness, shooting or jerking sensations in the jaws. *Tongue, throat, etc.*—Dryness and swelling of the tongue; white or yellow-furred tongue; paralysis of the organs of speech; nauseous taste; loss of appetite; soreness and dry heat in the throat; swollen, elongated uvula; rising of sweetish or acid water in the mouth. *Stomach, etc.*—Heartburn; bilious nausea; vomiting of blood with feverish symptoms (in alternation with *Arnica* if from a strain or blow); bilious colic; inflammation of the stomach, bowels, or peritoneum; constipation, with fever; profusely bleeding piles; bilious diarrhoea; diarrhoea during *teething*, the little patient's cheeks being flushed, with other febrile symptoms; summer complaint of children (*cholera infantum*); inflammation of the *liver*; jaundice.

URINARY GROUP.—Retention or suppression of urine; painful urging to urinate; high-coloured urine, with or without brickdust sediment; burning and tenesmus of the neck of the bladder; inflammation of the kidneys.

2.—Antimonium Crudum (*Crude or Common Antimony*).

GEOGRAPHY, HISTORY, ETC.—This mineral exists in great abundance in nature, more particularly in Hungary, Germany, France, England; also on the island of Borneo, from which large quantities of the crude ore are imported as ballast.

The drug was known in the remotest antiquity, and probably to the alchemists, and few have excited so much notice in the medical world, it being regarded as a panacea for nearly every disease. After lauding its virtues in many diseases, the allopathists have at length suffered it to fall into almost total disuse, except as a chief ingredient in Plummer's Pill.

In consequence of the native sulphuret being generally found combined with small quantities of lead, copper, iron, and arsenic, it requires great care and skill in its preparation. It is insoluble in water, but easily reduced to powder, which is of a blackish colour, except when very pure, when it has a reddish hue. We use the crystalline tersulphuret, either artificial or native, preferring the latter, and prepare it for use by *trituration*.

PROMINENT USES.—The action of antimony seems to be more generally expended upon the mucous membrane both of the stomach and alimentary canal, and is chiefly indicated by nausea, *eructations*, *flatulence*, alternate diarrhoea and constipation, etc., especially after overloading the stomach, and in old people. Sensitiveness to cold; arthritic pains in the fingers; gout with gastric derangements; rheumatic inflammations; numbness or pain in the legs; cough and oppression at the chest; spasms in the windpipe, etc.

SKIN.—Red pimples; chronic vesicular or pustular eruption, like chicken-pox; pustules on the scalp or beard; blotches or unhealthy-looking boils on the nose (*grog-*

blossoms); fistulous ulcers; burning and stinging eruption, like nettle-rash, with nausea and thirst; scald-head with unhealthy, coherent, dirty-looking crusts; itching of the scalp and falling off of the hair; corns and horny excrescences; nodes. *Ant. Crud.* is particularly useful when the gastric symptoms characteristic of this remedy are also present.

HEAD, MOUTH, ETC.—Gnawing pain in the top of the head; itching and falling off of the hair; redness and inflammation of the eyelids, especially in gouty patients; cracks or sores at the corner of the mouth; eruptions on the cheeks; twitching *pain in carious teeth*, increased by eating, or applying cold water, and at night; white-coated, or dirty, greyish tongue; foetid breath; rawness or soreness of the throat; thirst; anorexia; dryness of the lips.

DIGESTIVE ORGANS.—Derangements caused by immoderate indulgence of the appetite; loss of tone in the stomach; a sensation in the stomach as if it were overloaded; distension of the abdomen after a meal; *eructations, bitter or tasting of the ingesta; loathing, nausea, and inclination to vomit*; vomiting of bile and mucus; gastric symptoms, aggravated in the morning; frequent discharge of foetid flatulence; wine, even when diluted with water, and pastry, increase or reproduce the gastric symptoms; discharge of a yellowish mucus from the anus; the patient is troubled at one time with constipation, at another time with diarrhoea.

URINE.—Chronic catarrh of the bladder; frequent and copious emission of red, brown, or yellow urine; turbid, foul-smelling urine; cutting pain during micturition.

3.—Antimonium Tartaricum (*Tartar Emetic, Stibium*).

PROPERTIES, USES, ETC.—This salt is a composition of teroxide of antimony, potash, tartaric acid, and water, boiled together in an iron vessel. It crystallizes in rhombic octohedrons, which

lose their transparency and diminish in weight by exposure to the air. Tartar emetic in powder is sometimes adulterated; it is therefore preferable to procure it in well-formed crystals. Though less violent as a poison than was at one time supposed, it has nevertheless been highly destructive to life. For homœopathic purposes it is prepared partly by aqueous solution, and partly by *trituration*. In our *Materia Medica*, *Tartarus Emeticus* holds by no means so prominent a place as in that of the old school, who use it largely in pneumonia, pleurisy, bronchitis, croup and laryngitis, jaundice, acute rheumatism, hydrocephalus, and most other acute inflammatory affections. Even in these cases it benefits in consequence of its homœopathic relationship. “From its beneficial operation in pneumonia, it is supposed to exercise a specific action on the lungs, and this opinion is strengthened by the fact that the lungs of animals killed by it were found congested, of an orange, red, or violet colour, and, in some cases, *hepatized*” (*Waring*).

PROMINENT USES.—Catarrhal derangements, involving the mucous membrane of the mouth, throat, larynx, bronchi, stomach, and intestinal canal; also the mucous membrane of the nostrils, ears, eyes, and general external surface. Indirectly, it controls the circulation. In frequent small allopathic doses (gr. $\frac{1}{16}$ — $\frac{1}{4}$), it produces pustular eruptions on the skin or palate, like those of small-pox, or a red efflorescence on the skin; symptoms of congestion of the lungs; prostration, emaciation, and, if pushed to an extreme extent, death. In the old practice, *Unguentum Antimonii Tartarati* is used as a *counter-irritant* over the subclavicular region in *phthisis*. If rubbed into the skin for fifteen or twenty minutes daily, the ointment soon produces an extensive crop of pustules.*

FEVER GROUP.—Cold creepings, chilliness alternating with

* An interesting case of the disease-producing effects of Tartar Emetic is recorded by Dr. Baikie in “The Homœopathic World,” March, 1866, page 73.

flushes of heat; marked uneasiness; heat, thirst, copious sweats; quick, feeble, irregular, tremulous pulse; strong inclination to sleep.

HEAD, ETC.—Headache, especially over the eyes, with dizziness and stupefaction; drawing or digging sensation at the root of the nose; sneezing and fluent coryza; deficient taste and smell; the first stage of influenza.

RESPIRATORY GROUP.—Rattling of mucus, with short, difficult breathing; dry, hard, barking, or suffocative cough; a sensation of deficiency of air, compelling the erect posture, and relieved by coughing and expectoration; pneumonia; palpitation of the heart, with great oppression at the chest.

DIGESTIVE ORGANS.—Nausea, vomiting and diarrhoea; vomiting preceded by a distressing feeling of nausea, anguish, yawning, watering of the eyes, and severe pressure at the stomach; vomiting followed by a drowsy and weary feeling; loathing; desire for cooling things; pale sunken face; dimness and swimming of the eyes; severe colic and flatulent distension of the stomach.

4.—*Arnica Montana* (*Leopard's Bane*).

GEOGRAPHY, ETC.—This plant is indigenous to the mountainous plains of a great part of continental Europe. also to America and Siberia; but it flourishes particularly in Switzerland. Its medicinal properties are more especially concentrated in the *flowers* and roots. The strong alcoholic tincture is of a brownish, yellowish-green colour, yielding a strong characteristic odour, which predominates over that of the alcohol, and when properly made, scarcely becomes turbid by admixture with water. The uses of *Arnica* as an external application are stated in the chapter on the “External Remedies.” In many cases, it is desirable to employ this remedy both internally and externally at the same time.

PROMINENT USES.—Affections immediate or remote, local

or general, resulting from *injuries from falls or blows*; such as a torpid condition of the nerves from a fall, or a blow on the head, or in any other way producing concussion of the brain. It aids the reparative process resulting from bruises, sprains, sores of bed-ridden patients, excessive physical fatigue, etc. It is also useful in stitching pains in the chest, rheumatic and gouty affections, bruise-like pains in the small of the back, varices, loss of blood, etc. It is chiefly adapted to plethoric persons, disposed to cerebral congestion, and acts but feebly in those of soft flesh or debilitated constitutions.

SKIN.—*Chilblains*, swollen, hot, or tingling; pricking sensations in any part of the body; small boils; soreness of the nipple.

HEAD, ETC.—Headache resulting from violence applied to the head, or of a rheumatic nature, with dizziness; headache better when lying down, and worse on sitting up; burning in the head when the body is cool; bleeding from the nose; red, hot swelling of the cheek; inflammation of the eyes from injuries or dust; bruised pain, or the escape of blood from "boxing the ears," or other injuries; convulsive and spasmodic affections; lock-jaw; active discharges of blood; vomiting and spitting of blood, and other complaints resulting from *bruises, falls*, and similar injuries; severe concussions, such as often occur in railway accidents, without leaving external marks of violence; concussion of the brain.

RESPIRATORY GROUP.—Short, panting, difficult breathing; stitching pains, with aching and bruised feeling in the chest; false pleurisy; short, hacking, tickling cough; expectoration coloured with blood after cough, or from severe exertion, as in rowing, running, or singing.

DIGESTIVE GROUP.—Putrid odour from the mouth; foul, bitter taste early in the morning; heartburn, retching, vomiting of blood; constipation after an injury.

URINARY ORGANS, ETC.—Discharge of bloody urine after a blow or fall on the bottom of the back or lower part of the abdomen; paralysis of the neck of the bladder from injury to the spine; immediate treatment after childbirth.

5.—Arsenicum Album (*Arsenious Acid, White Arsenic*).

COMPOSITION, ETC.—Arsenious acid is the teroxide of the metal arsenicum, and is usually obtained in Saxony and Bohemia by roasting or smelting cobalt ores, in which arsenic is a considerable ingredient. During the roasting the arsenic rises in vapour, takes the oxygen from the air, and so forms this acid, which condenses in the chimneys. It is a white solid, looking like porcelain or white marble, but is really of a crystalline substance, as may be seen when the powder is placed under a microscope. It is very sparingly soluble in water, although boiling water will dissolve much more than cold. In shops it is generally kept in the form of powder; and so is easily adulterated with chalk, carbonate of lead, etc. On this account it is better to sublime the acid for medicinal purposes, as by this process extraneous substances can be removed. Taken into the mouth it has no immediate decided taste, but it soon occasions an acrid sensation.

PHYSIOLOGICAL ACTION.—Its injudicious or prolonged use occasions a general sinking of the vital powers, with derangement of the digestive and nervous systems, a small, quick, and often irregular pulse, sleeplessness, and swelling of the face and extremities. Mr. Hunt states the effects of medicinal doses to be—1, irritation of the conjunctiva; 2, swelling of the face; 3, desquamation of the skin, only observable under a magnifying glass; 4, portions of the skin, protected from light, assume a dirty-brown appearance. Sir Thomas Watson mentions a peculiar silvery whiteness of the tongue as one of the symptoms. Poisonous doses produce violent

vomiting, diarrhœa, burning pain in the stomach, thirst, constricted state of the mouth and throat, flushed, swollen, anxious countenance, quick pulse, extreme debility, and usually convulsions before death. The deleterious properties of arsenious acid are widely known, and the foul deeds which have been committed with it have excited prejudices against its employment as a therapeutic agent. Arsenic, capable of producing great and fatal depression in large doses in healthy persons, is admirably adapted to feeble and impoverished constitutions, and to a great number of the maladies of such persons when administered in homœopathic doses. It is prepared for use by solution and trituration.

PROMINENT USES.—Affections of persons *debilitated* by excesses, innutritious diet, endemic diseases of *low and marshy districts*, syphilis, *scrofula*, abuse of quinine. It is especially indicated by great, rapid depression of the vital energies, *prostration and emaciation*, irritability of the stomach and relaxed bowels, *Asiatic cholera*, spasms, general *dropsical swellings*, chronic *eruptions*, cancer, carbuncle, and malignant skin diseases. Its most marked indications are extreme general *feebleness*, *prostration*, and *burning pains*, particularly in the interior of the affected parts, and worse at night.

SKIN.—Earthy, bluish, cadaverous colour; *burning itching*, not removed by scratching; *malignant variola*; red pimples, which break and form spreading ulcers; pustules, obstinate ulcers, and cancerous affections accompanied with *burning*; foetid secretions and tendency to run into mortification; general *dropsy*; chlorosis; jaundice; miliary eruption; *chronic impetigo* and *eczema*.

FEVER.—*Intermittent fever*,* the stages flowing impercep-

* The tasteless ague drop, long celebrated in England, is a solution of arsenic. It ranks next in value to quinine, over which it has the advantage of being of a less disagreeable taste, and of being cheaper (*Waring*).

tibly into each other; typhoid, putrid, and other fevers of a low type, with rapid prostration, dry, burning skin, or cold, clammy perspiration; intense thirst; extreme weakness and trembling; rapid, wiry, feeble, intermittent pulse.

SLEEP.—Anxiety at night, tossing and starting as if in affright; great weariness and restlessness.

MENTAL.—Hypochondriac mood; dejection, as if the patient had been guilty of some flagrant crime; mental derangement; weakness of memory, and of the other intellectual faculties; paroxysms of hysteria, epilepsy, and paralysis.

HEAD, FACE, ETC.—Periodical headache; great weight in the head; noises in the ears; tearing headache, with nausea and debility; stupefaction, dizziness, soreness of the head and face, and burning, excoriating eruptions, with foetid smell; pale, sunken, or bloated face: hippocratic expression; cancerous affections of the face. Ophthalmia; amaurosis; weakness of sight; dread of light; swelling of the lids. Swelling, dryness, or stoppage or burning of the nose, with sneezing, and profuse discharge of acrid fluid.

MOUTH, ETC.—Dryness and bitter taste in the mouth; disagreeable odour from the mouth; aphthæ; coated, cracked, blackish, and tremulous tongue; dryness and burning in the throat; throat affections of a serious or gangrenous character.

RESPIRATORY GROUP.—Suffocative paroxysms, especially after lying down at night; oppressive, anxious, and laboured breathing, often with great debility; difficult expectoration, the mucus being sometimes streaked with blood; dropsy of the chest; asthma; difficult breathing, especially on ascending a hill.

DIGESTIVE GROUP.—Nausea and vomiting, often chronic, and attended with heat and burning in the stomach and epigastrium; indigestion, waterbrash, and vomiting after food; sensation of weight and anguish, with cold and chilly feeling; great tenderness or violent colic; cancer of the

stomach; diarrhoetic stools, with frequent foetid discharges; tenesmus and burning at the anus; great weakness and constant coldness; dropsy of the abdomen; ascarides; piles, with burning and itching; paralysis of the bladder; difficulty of urinating. *Asiatic cholera* in the last stage, with cold breath, etc.

MENSTRUATION.—Premature, pale, profuse, menstrual discharge, lasting too long; amenorrhœa, with acrid, excoriating leucorrhœa.

6.—Aurum Metallicum (*Aurum Foliatum, Metallic Gold*).

HISTORY, ETC.—This metal is found extensively in South America, California, and New Holland. The Greeks are supposed by some, by others the Arabs, to have been the first to have used it medicinally. The alchemists diligently investigated its properties, with the view of discovering the elixir of life and the universal remedy. By some it was formerly supposed that gold had no curative properties, on the ground that it was not soluble in the gastric fluid. By the peculiar process of *trituration*, first adopted by Hahnemann, and now generally practised in our school, gold and any other substance can be made perfectly soluble by first destroying the cohesion of its constituent particles. Recently the opinions of allopathic medical men have been considerably modified as to the complete inertia of gold. Our preparations are made from the finest gold-beater's leaf by the ordinary mode of trituration.

PROMINENT USES.—Hysteric, hypochondriacal, syphilitic, and mercurial complaints; *nightly bone pains*; inflammation and ulceration of the bones; excessive sensitiveness of the body; palpitation; susceptibility to pain, etc.

MIND.—Hypochondria, sullenness, peevishness, tremulous agitation, irascibility, religious mania, loathing of life, with

suicidal tendency, oppressive anxiety. Our provings of gold show that it causes melancholy and great depression of spirits.

HEAD, ETC.—*Rush of blood to the head*: headache, aggravated by reading or reflection; *muscae volitantes*; pain in the bones of the head; hysteric hemicrania; mercurial or syphilitic headache, with severe pain in the bones. *Oxæna*, with caries of the nasal and palatine bones; congestive toothache, with rush of blood to the head; foetid breath; chronic catarrh, with purulent discharge from the nose.

SKIN.—Warts, tetters, ulcers, nodes.

HEART.—Palpitation, with rush of blood to the chest; suffocative paroxysms; faintness, with blueness of the face.

SEXUAL GROUP.—Induration of the prostate gland; swelling and induration of the testes; chronic *orchitis*, with aching pain; nocturnal erections and emissions; prolapsus and induration of the uterus; hysteria, with profuse menstruation.

7.—Belladonna (*Atropa Belladonna*, *Deadly Nightshade*).

NATURAL HISTORY, ETC.—This is an indigenous plant, also of common growth throughout Europe and most temperate latitudes, flourishing upon a dry soil and the slopes of hills. It has a fleshy, creeping root, and herbaceous stem, bearing a beautiful, sweet, but highly poisonous berry, of a violet-black colour, which, when bruised, emits a foetid, nauseating odour. The plant is readily known by the livid appearance of its flowers, and the character of its leaves, which are ovate-acute, quite entire, and always come off in pairs, of which one is much larger than the other. It flowers in June and July, and its berries are ripe in September. The leaves of the wild plant are considered more valuable than those of the cultivated. “The leaves of *Dulcamara* are sometimes sold by herbalists for those of *Belladonna*, and consequently may be sometimes employed medicinally by those who look

for the powerful effects of this medicine, and who, being disappointed, will afterwards pronounce upon the inefficiency of the drug" (*Royle*). The plant derives its generic name from *Atropos*, one of the Fates, and its specific name, *Belladonna*, from the Italian language, signifying a beautiful lady. This has been said to be owing to its being used as a cosmetic for the face; but more probably from its being employed to dilate the pupils—a practice still adopted by some Parisian women, as it is supposed to confer on them additional charms. In consequence of its poisonous properties, it should not be cultivated as an ornament, or for medicinal purposes in places to which children have access. For medicinal uses, the stems, leaves, and flowers are used, from which, in the first instance, a tincture is prepared.

POISONOUS EFFECTS.—The following, the most striking symptoms produced by a poisonous dose, are most interesting to all homœopathists:—Dryness and heat of the mouth and fauces, attended with thirst. If the dose has been large there are also difficulty of swallowing and articulation; constrictive spasms of the throat; nausea, sometimes vomiting, and at times swelling and redness of the face; dilatation of the pupils; obscurity of vision, or absolute blindness; optical illusions; suffused eyes; singing noises in the ears; numbness of the face; confusion of the head; giddiness; delirium, simulating intoxication, which may be combined with or followed by profound sleep; scarlet eruption on the skin; and if the dose has been very large, complete coma, and death.

ALLOPATHIC PREPARATIONS.—1. *Tinctura Belladonnæ*.—Coarsely powdered leaves oz. j.; proof spirit Oj. Prepared by maceration and percolation. 2. *Extractum Belladonnæ*.—A green extract from the juice. 3. *Emplastrum Belladonnæ*.—Extract of Belladonna added to soap plaster. 4. *Unguentum Belladonnæ*.—Extract of Belladonna gr. lxxx.; rubbed

up with lard oz. 3. Its medicinal properties are anodyne and anti-spasmodic. Its power of dilating the pupil calls it into frequent requisition by the ophthalmic surgeon.

PROMINENT USES.—Scarlatina and its sequelæ; inflammatory affections of a violent character, in which the minute blood-vessels (*capillaries*) are almost ruptured by the force of the blood. It has a special and powerful action upon the brain and its membranes; the mucous lining of the throat is also remarkably sensitive to its action. Its chief characteristics are stinging or burning pains, aggravated by movement; swelling and shining redness of the affected parts; delirium; pain of a nervous character; trembling of the limbs; spasms; convulsions; paralysis; anguish about the heart. It is especially adapted to persons whose brain is in a state of great functional activity. The extent of the action of this remedy upon the brain has been well pointed out by *Test*, who considers that *the deleterious action of Belladonna is exactly proportionate, in every species as in every individual, to the degree of development and functional activity of the organ upon which the poison exercises its specific action, namely, the brain.* This explains to us (1) why, of all animals, man is most accessible to the action of *Belladonna*. (2) Why, among men in a state of health, or to whose diseases (by a legitimate application of the law of similitude) it corresponds most exactly, those are most powerfully affected by *Belladonna* whose cerebral faculties are most liable to become irritated, or whose brains have the greatest development; these are, of course, children. In proof of this, Hufeland states that idiots are protected from the deleterious action of *Belladonna*, which they eat with almost the same degree of impunity as animals of an inferior order, by the inertia and incomplete development of their cerebral organ.

TEMPERAMENT, ETC.—*Belladonna* is generally most adapted to affections of amiable persons, inclined to become fat, of

light hair, blue eyes, and delicate, easily-inflamed skin. It is thus specially adapted to women and children.

SKIN.—*Scarlet redness* and scarlet spots on the face, neck, chest, and abdomen; diffused redness and burning swelling of the affected parts; non-vesicular erysipelas; rheumatic inflammations, red, hot, and swollen; chilblains, boils, and painful glandular swellings.

SLEEP.—Drowsiness, or great sleeplessness and restlessness; frequent waking; starting in sleep, or when on the point of falling asleep, as in affright; screaming, moaning, or terrifying dreams; unrefreshed sleep; headache when rising.

MENTAL GROUP.—Nightly delirium or paroxysmal insanity with changeableness, being merry and foolish at one time, melancholy and sad at another, with screaming and violent rage at another; absence of mind; immoderate laughter; foolish manners; nervous anxiety in the region of the heart.

HEAD.—Giddiness; violent aching in the forehead, aggravated by movement and stooping; congestive, rheumatic, and nervous headaches, with symptoms of cerebral engorgement; excessive pulsative and throbbing headache; great heat and redness of the face; sensation as if the brain were too large and pressing outwards; inflammation of the brain, apoplexy, vertigo; epileptic convulsions; hysteria.

EYES.—Extreme sensitiveness or dread of light; inflammatory redness and burning pain in the eyes; ophthalmia; amaurosis, complete or partial; perverted or double vision; *muscæ volitantes*; flashes of light; staring or glistening eyes, *dilated pupils*.

EARS AND NOSE.—Tingling and roaring noise in the ears; deafness, especially if resulting from the suppression of the eruption of scarlatina or measles; lacerating pain in the ears; otalgia, with paroxysms of sharp crampy pain in the inner ear; noises as of rushing wind, loud reports, etc., in

the ears; otorrhœa; swelling of the glands near the ears; bleeding at the nose.

MOUTH AND THROAT.—Rheumatic toothache; throbbing pains from hollow teeth, extending to the temples with redness and tenderness of the gums, drawing in the ear, beating in the head, or red, hot face; the teeth feel elongated; eating and hot drinks aggravate the pains; rheumatic lock-jaw; inflammation of the mouth and tongue; tremor of the tongue; *sore throat*, with pain, swelling, and difficulty of swallowing; rawness of the throat; bright-red appearance of the tonsils and uvula; quinsy; diphtheria; stammering; weakness of the organs of speech; paralysis of the tongue; spasmodic constriction of the throat; aversion to all kinds of liquids, as in hydrophobia.

RESPIRATORY GROUP.—Violent, dry cough, worse at night, excited by a tickling sensation in the throat, with headache and redness of the face; painfulness of the larynx when coughing; spasmodic hooping-cough; hoarseness; aphonia; laboured and difficult breathing; spasms of the chest.

HEART.—Tremor, anguish, and palpitation; cramp-like pressure in the region of the heart.

DIGESTIVE GROUP.—Violent pain in the stomach, aggravated by pressure; griping, clawing pains about the navel; peritonitis; distended bowels; diarrhœtic evacuations with straining.

URINARY AND SEXUAL GROUP.—Involuntary passage of urine from paralysis of the neck of the bladder; wetting the bed; inflammation of the kidneys and bladder; affections of the womb, involving the head and nervous system; tumefaction of the breasts; childbed fever; toothache, spasms, and colic of pregnant women.

BELLADONNA AS A PROPHYLACTIC.—Its power of *preventing* attacks of epidemic scarlatina, as well as of curing that disease, is one of the most striking applications of the

principle of similitude, and was first announced by Hahnemann; Hufeland confirmed the statement of Hahnemann, and it has since been abundantly established by facts. The following passage is by an eminent allopathic authority:—

“*Belladonna*, as a *preventive against Scarlet Fever*, was first proposed by Hahnemann in 1807. Bayle, in 1830, published notices of 2,027 persons who took this medicine during an epidemic, and of those 1,948 escaped. Dusterberg, in order to test more decidedly its preventive powers, purposely omitted administering *Belladonna* to one child in every family; and he states that in almost every case this child alone was seized with the disease. Dr. Zeuch, physician to the Military Hospital for Children in the Tyrol, after 84 children had been attacked by the fever, administered *Belladonna* to the remaining 61. With a single exception, they were all preserved from its attacks, although the fever was raging around. Mr. Stievenart, who quotes the above, adduces his own experience in its favour. Amongst other evidence, he cites the village of Curgies, where he administered *Belladonna* to the children of a public school, and allowed them to have communication with other children of the village, amongst whom the disease was rife. All who took the *Belladonna* escaped, but the few who refused to take it were attacked by the fever. In England it has been tested by Newbigging, who states that he succeeded in arresting the progress of the disease by *Belladonna*, in a public institution, after seclusion had completely failed. Similar testimony is adduced by Schenk, Köhler, Etmüller, Meglin, De Lens, and Hufeland; whilst Lehman, Hoffmann, Windt, Dr. Sigmond, and others, express their disbelief in its prophylactic power. The weight of testimony is decidedly in favour of its preventive action” (*Waring*).

DIFFERENCE BETWEEN BELLADONNA AND ACONITUM.

Belladonna resembles the action of *Aconitum* in some respects, but it differs from it in the following important particulars:—(1.) It produces much more intense congestion; the inflammations occasioned by it attain a higher form and are marked by symptoms of a much more dangerous character—delirium, coma, convulsions. (2.) *Aconitum* is adapted to simple inflammatory fevers, or to the feverish reaction of the arterial system *generally*; *Belladonna* to fevers with

symptoms more or less strongly indicating inflammatory action of the *brain*. (3.) *Belladonna* has a special affinity for inflammations affecting delicate organs or tissues, such as the eye, the ear, the testicle, and to sensitive individuals of a highly refined organism.

ANTIDOTAL TREATMENT.—In the event of poisoning by *Belladonna*, an endeavour should first be made to remove the poison from the stomach; twenty to thirty grains of the sulphate of zinc form a suitable emetic; after vomiting, a cup of strong black coffee is useful to aid in restoring the irritability of the muscular fibre, and arrest the tetanic convulsions.

8.—*Bryonia Alba* (*White Bryony*).

HISTORY, ETC.—There are many varieties of Bryony, but the one proved by Hahnemann, and used by Homœopathic practitioners, is the *Bryonia alba*, indigenous in the north of Europe, Germany, and some parts of France; and not the *Bryonia dioecia*, common in the hedges and thickets of this country. This latter variety, *Black Bryonia*, is chiefly used as an external application in *bruises*. Professed pugilists employ it in the form of a poultice, scraping the root, after removing the bark, very finely, and mixing it with bread-crumbs to a proper consistence, and placing it over the ecchymosis, renewing it every six or eight hours. It is said to remove all discoloration in from one to two days. Although the two kinds have many points of analogy, the *Bryonia alba* is much to be preferred for homœopathic purposes, especially for internal use. The part of the plant we employ is the large, fleshy, white root, from which the juice is expressed, or from which, scraped down, we make a deep yellow and very bitter tincture. The root of *Bryonia alba* differs from the *dioecia*, being more thickly covered with *tubercles*, and more branched, and is an acrid poison.

PROMINENT USES.—Although *Bryonia* occupies a foremost rank in our materia medica, it probably does so, not so much from the multiplicity of diseases in which it is curative, as from the frequent and general occurrence of those diseases, the chief of which are the following:—*Rheumatic* and *gouty* affections; *gastric* and *nervous* disorders; *torpidity of the liver and bowels*, the digestive organs being especially under its control; complaints in which the serous membranes are involved; and when effusions and exudations have taken place, as in *pleurisy, dropsy*, etc.

TEMPERAMENT, ETC.—*Bryonia* is especially efficacious in persons of an irritable disposition, and to patients suffering from hypochondriasis and gloomy depression of spirits; also to affections brought on by exposure to cold, dry weather, and piercing wind, and when the symptoms are intensified by movement or pressure.

SKIN.—*Suppression of inflammatory rashes*, as in scarlatina, and measles; erysipelas affecting the joints; yellow-colour of the skin, jaundice; burning and itching; rashes and pimples; rash of parturient women, and their infants; nettle-rash.

FEVER.—*Chilliness* is the predominant symptom for the use of *Bryonia*; intermittent fever; typhoid, gastric, bilious, and rheumatic fevers, and in those preceding smallpox, measles, etc.; the fever is generally attended with a dry cough and stitches in the chest.

HEAD.—Headache with heaviness, nausea, and compressive pain; giddiness; headache, aggravated by stooping, or any movement, as opening or shutting the eyes; rheumatic headache.

FACE, NOSE.—Red and bloated, pale or clay-coloured cheeks; dry, chapped, or swollen lips; dryness and obstruction of the nose; bleeding of the nose; darting pain in the head and forehead.

RESPIRATORY GROUP.—Violent cough, with expectoration or hawking up of mucus, sometimes streaked with blood; *painful cough*, as if the head and chest would fly to pieces; *acute and chronic bronchitis*; asthma; pneumonia; difficult breathing; stitching pains in the side, which impede the breathing when lying on the back, and are increased by every movement; *rheumatic affections of the muscles of the chest*; *catching of the breath on moving, coughing, or taking a deep breath*.

BACK, ETC.—Painful stiffness and tension in the nape of the neck on moving the head; bruised feeling in the small of the back; lumbago; limping or cutting pains in the hips; rheumatic swelling of the joints; gouty swelling of the feet; chilblains.

DIGESTIVE GROUP.—Dryness of the mouth and throat; white or yellow-coated tongue; sickly, putrid, or bitter taste; sour or bitter risings; eructations; vomiting of food, bile, or mucus; sensation of pressure in the stomach, with great intolerance of pressure; inflammation of the liver and stomach; pain in the right side (liver); colic with diarrhoea; dropsy of the abdomen; inaction of the bowels from sedentary habits; constipation with spasms; red, hot, and scanty urine; paralytic affections of the bladder from gastric, rheumatic or nervous disorders.

9.—*Calcareo Carbonica* (*Carbonate of Lime*).

NATURAL HISTORY, ETC.—*Calcareo Carbonica* is found abundantly in nature in the form of chalk, marble, egg-shells, oyster-shells, etc. The insolubility of the salts of lime formed an obstacle to their general use by allopathic medical men; notwithstanding this they use it occasionally for its antacid and astringent properties. For homœopathic purposes we employ *oyster-shells*, from which, after washing,

boiling, exposing to a charcoal fire, sifting, and reducing to a powder, we first make triturations.

PROMINENT USES.—Diseases of the *osseous system*; chronic scrofulous affections; difficult dentition; swelling of the abdomen from enlargement of the mesenteric glands; *marasmus*; glandular enlargements of the neck; chronic affections of the skin. It is especially useful in many diseases of infants and young children.

SKIN.—Chronic urticaria; chronic rash and eczema; rough, readily ulcerating skin; goitre; warts; sweating feet; polypus; fistula; ulcers; ganglia; chronic eruptions on the face or behind the ears.

HEAD.—Itching eruptions on the scalp and face; dizziness or heaviness in the head; stupifying headache, as if it would burst; tinea capitis, and falling off of the hair; scurfy eruptions, and glandular swellings.

EYES, EARS, ETC.—Scrofulous ophthalmia, with swelling and redness of the eyes; agglutination of the lids; profuse lachrymation in the open air; specks on the cornea; photophobia; amaurosis. Hardness of hearing, with buzzing in the ears; roaring, ringing, and hammering noises in the ears; scrofulous otorrhœa; moist eruptions behind the ears; polypus in the ear. Scrofulous redness, swelling, and painfulness of the nose; loss of smell; ozœna; stoppage of the nose, or discharge of pus; foetid odour from the nose; polypus.

TEETH.—Difficult first dentition, with heat, swelling, and sensitiveness of the gums; fistula dentalis; toothache during pregnancy, with rush of blood to the head, from cold, aggravated at night, and by taking food.

RESPIRATORY GROUP.—Tuberculous condition of the lungs; cough, particularly at night, with yellow, green, foetid expectoration, or hæmoptysis; feeling of roughness of the larynx, and oppression or sensitiveness of the chest; difficulty of breathing.

DIGESTIVE GROUP.—Anorexia; dyspepsia with acidity, heartburn, loss of flesh and debility; swelling of the mesenteric glands; constipation with swelling of the bowels; chronic looseness of the bowels, with slimy, foetid motions, particularly during dentition; *colliquative* diarrhoea in consumptive patients; burning and itching in the anus; fistula; prolapsus of the rectum; ascarides.

URINARY AND SEXUAL GROUP.—*Too early* and *copious* menses; colicky pains during the menses; burning and itching leucorrhœa preceding the menses; excessive sexual desires; nocturnal emissions, etc.; too abundant, or deficiency of milk in nursing women; *chlorosis*, with pale face, loss of appetite, and confined or relaxed bowels.

OSSEOUS GROUP.—Scrofulous affections of the bones; rickets; softening or curvature of the bones; slow closing of the fontanelles, or softening of the head in infants; late in learning to walk; general atrophy. *Calcarea* is a valuable remedy in many chronic affections originating in an imperfect performance of those functions by which the solids as well as the fluids of the body are renovated.

10.—Camphor (*Laurus Camphora*).

NATURAL HISTORY, ETC.—The *Laurus Camphora*, from which *Camphor* is obtained in great abundance, is a large, handsome evergreen tree, very common in China, Japan, and other parts of Eastern Asia, where it grows to the size of our tall oak. Through all parts of it, the trunk, root, and branches, Camphor is diffused, and is obtained by sublimation. The odour, appearance, and volatility of Camphor are well known. Water dissolves a very small quantity of it, scarcely a grain in an ounce; distilled alcohol, sixty degrees over-proof, dissolves its own weight of camphor, which is precipitated on the addition of water. It is also soluble in ether, strong acetic, and the dilute mineral acids.

PRIMARY ACTION OF CAMPHOR.—"In doses of gr. ij.—v—x. camphor acts as a stimulant; it increases the action of the heart and arteries, exhilarates the spirits, excites warmth of body and diaphoresis; the pulse is rendered softer and fuller. These effects are transitory, and are followed by depression. In somewhat larger doses, it allays spasm and pain, and induces sleep. In poisonous doses, it produces vomiting, vertigo, delirium, and convulsions. It acts chiefly on the nervous system; and, like sulphur, it transudes through the skin, and is exhaled by the lungs. . . . It exercises a powerful influence on the genito-urinary system; occasionally it causes strangury, yet by some it has been advised to relieve the strangury produced by cantharides" (*Waring*).

PROMINENT USES.—*The invasive stage of influenza and cholera; excessive sudden prostration of the nervous system, with coldness, cramps in the muscles, tremors, severe purging, etc.; and as a prophylactic against severe epidemic or nervous diseases, especially catarrhal.*

CAMPHOR AND CHOLERA.—A saturated solution, containing equal parts by weight of camphor and of spirits of wine, recommended and successfully used by Dr. Rubini in several hundred cases of cholera, has excited much attention, and has been widely used during the recent outbreak of cholera (1866). Dr. Rubini directs that four drops of the saturated tincture of *Camphor* be given on *sugar*, not in water, every five minutes to patients seized with cholera, or in very severe cases five to twenty drops; and he states that ordinarily in two, three, or four hours, reaction will set in. It is gratifying to be able to add that his statements and successes have been abundantly confirmed in this country during the recent outbreak of cholera, which has not even yet subsided.*

* For interesting accounts of Dr. Rubini's treatment, and its successful adoption in this country, see two able articles by F. Smith, Esq., in the August and October numbers of *The Homœopathic World*, 1866.

HEAD.—Dizziness, staggering, as if intoxicated; dull or violent throbbing headache; sun-stroke; pale face; contortions of the muscles of the face; chills and chattering of the teeth; cold sweats about the head and neck; loss of consciousness; hysteria.

DIGESTIVE GROUP.—*Camphor* acts specifically upon the organic nerves of the stomach, and rapidly pervades the entire intestinal canal. It is especially efficacious in nausea, vomiting, burning in the stomach, Asiatic cholera, with cramps, abdominal spasms, and excessive purgings.

URINARY GROUP.—Retention of urine; strangury, with inclination to urinate, and tenesmus of the neck of the bladder. In infants thus suffering, the strong tincture may be administered by olfaction, a few seconds every fifteen minutes, till relief is obtained.

EXTREMITIES.—Drawing, cramp-like pain or stiffness in the calves of the legs, or in the muscles of the arms.

AN ANTIDOTE.—*Camphor* is an antidote to a great number of vegetable drugs, especially *Opium*, and such as cause paleness of the face, loss of consciousness, vomiting and diarrhoea. It also antidotes the injurious effects of excessive doses of *Cantharis*, and the bites and stings of insects;* in such cases it may be applied externally, and small doses taken internally at the same time.

ADMINISTRATION.—For many ailments, *olfaction* will be sufficient. In the precursory stage of influenza, or any sudden prostrating disease, with symptoms resembling those described, two drops should be administered on a piece of loaf sugar, and repeated every quarter of an hour, for three or four times. In *cholera*, four drops may be administered in the same manner.

* *Ledum Palustre* is also an excellent remedy for removing the injurious effects caused by the bites and stings of mosquitoes, hornets, wasps, gnats, etc., the lotion being made by adding twenty drops of the tincture to half a tumbler of water, for external application.

In consequence of its volatile properties the strong tincture must be kept quite separate from all other homœopathic remedies. The saturated pilules may be kept with the external tinctures in a distinct compartment.

11.—*Cannabis Saliva* (*Hemp*).

GEOGRAPHY, HISTORY, ETC.—This plant was originally indigenous to the East, but has been transplanted and cultivated extensively in Europe for commercial purposes. The hemp grown in India and the tropics differs from that grown in England by containing a larger proportion of resin, and the extract made in India, and then imported, has been found much stronger than that made in this country. The Indians make of its bark and the expressed juice of its leaves and seeds a liquor which has an intoxicating quality. The homœopathic preparation is made from the expressed juice of the flowering tops of both male and female plants. Some recommend the female plants alone, inasmuch as these exhale, during their flowering, a strong and intoxicating odour, whilst the male plants are completely inodorous.

PROMINENT USES.—The *genito-urinary organs* are most remarkably under its influence. The curative action of *Cannabis* in inflammatory affections of these organs is clearly accounted for on the homœopathic principle of its having the power to produce an analogous morbid condition in those organs when given in large doses in a state of health. Hemp causes a difficulty of urinating; a kind of paralytic weakness of the bladder; symptoms of stricture; chordee; burning and stinging before and after urination; discharge of pus and mucus; in fact, symptoms closely resembling those produced by *the poison of gonorrhœa*. The timely administration of *Cannabis*, in doses determined by careful observations in each case, has been a most successful remedy in the hands of homœopathic practitioners. It is also indicated in mis-

carriage, excessive sexual instincts, sterility, nocturnal emissions, etc. *Cannabis* has proved useful, as might be expected from its primary action, in removing many of the effects of *alcoholic intoxication*; also in removing the ailments from bodily fatigue, as after excessive walking.

12.—*Cantharis* (*Cantharis Vesicatoria*, *Spanish Fly*).

NATURAL HISTORY.—This insect is about eight or ten lines in length, by two or three in breadth, and of a brilliant green colour. During life, these flies have so powerful an odour, that swarms of them can thus be detected, even at a considerable distance. They are abundantly found in the south of Europe, especially in France, Spain, and Italy, in the early summer months, when they settle upon such trees as the white poplar, ash, privet, elder, and lilac, upon the leaves of which they subsist. Those caught in warm places, exposed to the sun, are the most energetic. They are generally collected in May or June, by shaking the tree early in the morning, from which the insects fall, having been benumbed by the cold of night. They are then thrown into vinegar or hot water and subsequently dried. To prevent them from being destroyed by other insects they should be preserved in well-stoppered bottles. We extract their medicinal properties by pulverization and maceration of the entire insect. The “fly-blister,” so well known in allopathic practice, is totally repudiated by homœopathic practitioners.

PROMINENT USES.—It seems to act specifically upon the *Genito-Urinary apparatus*,—inflammation, suppuration, gangrenous disorganization of the mucous membrane of those organs. It is therefore indicated in the following diseases:—*Nephritis*, with painful urination, passed in drops; *Cystitis*, with scalding and bloody urine, and agonising desire to evacuate it, sometimes accompanied with flushed face, glistening eyes, delirium, vomiting, etc.; *incontinence of urine*,

especially the form known as *enuresis nocturna* of children; *strangury*, or discharge of drops of blood; painful *gonorrhœa*; also some forms of *satyriasis*, *nymphomania*, *sterility*, *spermatorrhœa*, etc. Although, however, sometimes employed as a stimulant in *impotence*, it is of doubtful efficacy.

CEREBRAL GROUP.—Convulsions, with distortion of the limbs and inability to swallow; convulsions, with frightful noises from looking at water, as in hydrophobia; tetanic convulsions, epilepsy, chorea, rage.

SKIN.—Erysipelatous inflammation, with burning and exudation of serum, causing blisters. A weak solution of it applied locally in the case of burns and scalds, if used promptly, will generally prevent blisters, and aid the speedy cure, especially if the air be kept from the injured surface. It is highly serviceable in falling off of the hair, chilblains, frost-bites, obstinate ulcers on the legs with painful margins, gangrenous sores, etc.

CAUTION.—An iniquitous administration of this drug is sometimes resorted to under the impression that it excites the sexual propensities, and health has often been injured and even life destroyed by such a procedure.

ANTIDOTES.—The treatment for poisonous doses consists in the administration of copious diluents, emetics, and afterwards the strong spirits of *Camphor*.

13.—Carbo Vegetabilis (*Wood Charcoal*).

PREPARATION, ETC.—Vegetable charcoal is obtained by burning wood in covered-up heaps or in close vessels, with but a limited access of air. For medicinal purposes, the pollard beech of mountainous countries is selected, from the slow combustion of which a black, tasteless, and insoluble substance is obtained, remarkable for its power of counteracting putrefaction, and for combining with, and removing the odorous and colouring principles of most bodies. From

this wood, pulverized, we prepare our triturations, by which the latent, inherent medicinal properties of the crude substance are fully developed, so that it becomes a therapeutic agent of great value.

DISINFECTANT.—The action of charcoal is both disinfectant and antiseptic. The great fire of London, which banished the plague, is supposed to have done so, at least in part, by the disinfecting qualities contained in the vapours arising from the *smouldering* wood. Taken internally, it is absorbed into the system, it prevents putrefactive changes, and removes foetor of the breath. It has of late been largely used in the form of *charcoal biscuits*. As a tooth-powder, it is much employed, and is supposed to prevent, or check, caries of the teeth.

POULTICE.—“Externally, mixed with linseed meal, it forms an excellent *poultice* in gangrenous and foul ulcers. *Offic. prep.* Cataplasma Carbonis. Charcoal poultice. Wood charcoal in powder, oz. ss.; bread, oz. ij.; linseed meal, oz. iss.; boiling water, fl oz. x. Half the charcoal to be mixed in the poultice, the remainder to be sprinkled on the surface” (*Waring*).

PROMINENT USES.—Cachectic conditions, as weakness, consequent on acute disease, or following the excessive loss of animal fluids; intermittent fever; typhus *putridus*; collapse of pulse in the last stage of typhoid fever; offensive ulcers with foetid secretions; rheumatic or bruised sensation in the limbs and joints; tendency to perspire; liability to catarrhal and rheumatic affections from atmospheric vicissitudes; bad consequences from the abuse of mercury or quinine; *gangrena senilis*. Between this remedy and *Arsenicum* and *China*, there are many striking points of resemblance.

SKIN.—Chronic nettle-rash; chilblains; excessively itching eruption; unhealthy, burning, foetid ulcers; obstinate herpes; sweats, with putrid smell.

HEAD.—Beating or pulsatory headache; heaviness of the head; congestion; falling off of the hair; paleness of the face; swollen and chapped lips; eruptions on the face; bleeding of the nose.

RESPIRATORY GROUP.—Cough after slight exposure; cough with retching and profuse expectoration of mucus; spasmodic cough; sensitiveness to variations of the weather; chronic *hoarseness*; aphonia; roughness and scraping in the throat; laryngeal phthisis; neglected pneumonia, with foetid expectoration, or threatened gangrene of the lungs.

MOUTH.—Spongy and easily bleeding gums; rawness and soreness of the throat; toothache with ulceration.

DIGESTIVE ORGANS.—Oppression of the stomach after eating; flatulent distension of the stomach and bowels; burning and contractive pains in the stomach; belching of wind, with rumbling pain and emission of foetid flatulence; constipation of the lower bowel; diarrhoea, with a burning sensation in the rectum; bloody evacuations; piles; worms.

14.—*Chamomilla Vulgaris* (*Common Chamomile*).

NATURAL HISTORY, ETC.—This plant is indigenous to most parts of Europe, and flourishes in corn-fields, waste grounds, and by the roadside, especially on chalky soils. The name of the flower is derived from the Greek word *Chama* (low), and from *Matrix* (womb), for its supposed specific action on that organ. For homœopathic purposes we use the whole plant, gathered when in bloom, the extract from which is prepared as a tincture.

PROMINENT USES.—*Bilious and gastric affections*, especially of *children, and of females* of a nervous temperament, during pregnancy and the puerperal state; colic and diarrhoea of infants; affections produced by fits of anger; affections of the uterine system; neuralgic affections, the pains being of a dragging, tearing, and lancinating character; rash and

excoriation of infants. *Chamomilla* is often successful in the febrile attacks of children which do not yield to *Aconitum*.

MORAL GROUP.—Peevish, quarrelsome, irritable mood; great restlessness; consequences of anger, jealousy, or vexation; crying of infants, without any apparent cause.

HEAD.—Bilious, nervous, hysteric, or catarrhal headache, with an irritable mood; darting, tearing, throbbing headache; heat and redness of one cheek, with paleness and coldness of the other; sympathetic *convulsions* of children during teething, or from anger, or pain in the bowels; irritable condition and excessive sensitiveness of the nervous system.

TEETH.—Throbbing and jerking toothache, with a feeling as if the teeth were too long; toothache at night, especially in the warmth of bed, and aggravated by warm drinks, or a warm room, and sometimes attended with swelling of the cheeks; *difficult dentition*, with one of the cheeks red and hot, the gums swollen and sensitive, the child being very irritable, and convulsions indicated.

RESPIRATORY GROUP.—Catarrhal cough, with hoarseness, wheezing, and rattling of mucus; paroxysmal cough, excited by tickling in the air-passages, rendering breathing difficult.

DIGESTIVE ORGANS.—Sour or bitter taste; acidity of the stomach; painful spasms; flatulent colic; diarrhoea of children from cold or during *teething*, when the discharges are *greenish*, watery, slimy, and *very offensive*, and preceded by *cutting pains*; diarrhoetic discharges of undigested food.

SEXUAL.—Colic before the monthly period; profuse discharge, with dark coagula, and attended with labour-like pains, or retching and vomiting; excitability during pregnancy, and darting pains at the time the menses would otherwise have appeared; milk fever brought on by a fit of passion.

15.—China (*Cinchona Officinalis*, *Peruvian Bark*).

NATURAL HISTORY.—The cinchonas are natives of Peru and the adjacent provinces of South America; but attempts are now being made to cultivate the more valuable species in India, Ceylon, Java, Jamaica, etc. Cinchona trees are of great beauty, with evergreen laurel-like leaves, which diffuse a delicious fragrance around. None of the cinchonas are found at an elevation less than 2,500 feet above the sea, and some extend as far up as 9,000 or to nearly 12,000 feet. In consequence of the great demand for their bark, they seldom attain their full growth. Cinchona bark is collected by men called Cascarilleros, who, trained to the occupation from their early youth, are exposed to great privations and dangers, proceeding in quest of bark-trees over high mountain passes to regions far beyond the habitations of men. If less exciting, the life of the cascarillero is not less perilous than that of the chamois-hunter of the Alps; and the scenes amidst which it is spent are more varied and at least as grand and awful.

Sometimes the cascarillero wanders in the forest, and some subsequent traveller finds his bones and his bundle of bark where, hungry and exhausted, he renounced all hope, and laid himself down to die.

In homœopathic pharmacy, an alcoholic tincture is prepared from the yellow Peruvian bark, which has a bitter taste, and a beautiful deep-red colour.

MEDICAL PROPERTIES.—According to an eminent allopathic authority, cinchona, in small doses, improves the appetite and general tone of the muscular and circulating systems. It checks colliquative sweating in cases of extreme debility. Its action on the nervous system is shown by its extraordinary power in arresting diseases of a periodic character. In the treatment of *intermittent fevers*, it may either be given in a

large dose just before the recurrence of the paroxysm, or in smaller repeated doses during the intervals (*Waring*). The latter course is generally recommended. The efficacy of the infusion or decoction, according to the same authority, is greatly increased by the addition of a few drops of dilute sulphuric acid.

PROMINENT USES.—China is of special service in restoring the vigour of the system after it has been enfeebled by *intermittent* and other *miasmatic fevers*, long-continued diarrhoea, *hæmorrhages*, *prolonged nursing*, the use of purgatives or mercury, mental exertions, broken rest at night, or *sexual excesses*. Debility, disposition to sweat, especially exhausting night-sweats, anæmia, dropsical swelling, etc., are indications for its employment.

SKIN.—Yellow colour; jaundice; paleness of the countenance; yellow tinge of the eyes.

FEVER GROUP.—*Intermittent fevers*; chilliness soon followed by acute fever, with hot and dry skin, and afterwards by profuse perspiration. Acute fevers with copious sweats, of a *periodic type*; hectic and putrid fevers; excessive night-sweats; perspiration from slight exertions.

HEAD, ETC.—Intermittent headache, with dizziness, dimness of sight, or singing and roaring in the ears; nervous or rheumatic faceache; neuralgia, excited or aggravated by the slightest touch.

DIGESTIVE GROUP.—Sour or bitter taste; loss of appetite; languor and drowsiness after eating; indigestion; flatulent distension of the abdomen; vomiting; heartburn; pinching or cutting colic; enlargement of the liver and spleen; jaundice; diarrhoea, with watery, slimy, yellowish, and very offensive motions; discharges of undigested food; discharge of thread worms; *involuntary* stool and urine from excessive debility.

MENSES.—Profuse menstruation; obstinate leucorrhœa.

SEXUAL.—Excessive secretions of the seminal fluid, when arising from sexual vices; debilitating emissions, with undue excitement of the sexual instinct; spermatorrhœa,* especially if associated with weakness, hypochondria, and dyspepsia.

16.—Cina Anthelmintica (*Worm-seed of Judea*).

PREPARATION, ETC.—This plant is a hardy perennial shrub of Asia Minor, Barbary, etc. For homœopathic purposes we employ the seed, from which we obtain a yellowish-green tincture, or from which we make a trituration, the latter process being probably more likely to develop the medicinal virtues of the plant.

PROMINENT USES.—Affections arising from, or coincident with, the presence of worms in the intestinal canal, and indicated by some of the following symptoms: paleness of the face; picking at the nose; grinding of the teeth; voracious appetite, alternating with poor appetite; emaciation; itching at the seat; diarrhetic motions; discharge of worms; wetting the bed; acute hydrocephalus; cutting pain

* **SPERMATORRHŒA.**—After the major portion of this manual had been printed off, the author received a request from a correspondent to include in it a section on *spermatorrhœa* (seminal weakness), on the ground that the disease is much overlooked by practitioners of both schools, and that much mental and physical suffering, as also charlatanism and imposture, might thus be prevented. There is much truth in this. The evils are far more wide-spread and deeper than persons who only look at the surface of society have any conception of. The habit (self-abuse) which leads to the disease is often acquired very early, from perhaps somewhat older associates, and its practice is continued under the excitement occasioned by "sensationals," impure conversation, newspaper reports of Divorce Court trials, etc., and often without the patient being aware of the consequences of the vicious habit. The chief of these evils are,—mental depression, often extreme; nervous irritability and excitability; more or less obtuseness of the senses, as of hearing, or loss of memory; an aged appearance; various forms of indigestion, flatulence, constipation, giddiness, headache, etc.; in extreme cases, impotence, epilepsy, or even insanity. Happily, a course of judicious homœopathic treatment is sufficient, in nearly every case, to effect a cure. Some of the remedies required are pointed out in this *materia medica*, under appropriate side-headings,—*Phos.*, *China*, *Per.*, *Phos. Ac.*, etc. But the treatment involves many points of detail as to the remedies and general measures to be adopted which cannot be referred to in this foot-note. A conscientious homœopathic physician should be consulted.

in the abdomen ; irritation of the genitals ; hooping-cough ; hoarse, hollow cough, especially in tuberculous children, or those affected with worms ; also other diseases arising from inverminous affections.

17.—*Cocculus Indicus* (*Indian Berries*).

HISTORY, PROPERTIES, ETC.—This is the fruit of a parasitic shrub, growing on the mountainous parts of the coast of Malabar, on the island of Ceylon, and the Indian Archipelago. Although poisonous, it is nevertheless used in considerable quantities for imparting an intoxicating property to malt liquors. By two writers “On brewing” (Childe and Maurice), it is openly recommended. From its intoxicating properties it is used for entrapping game and fish ; animals, however, so caught should not be used as food. Externally it is used in powder or ointment in scabies, ringworm, porrigo, and for destroying vermin. For homœopathic purposes we employ the seeds, from which a tincture of a brownish straw-colour is prepared.

PROMINENT USES.—Disorders implicating the brain, the stomach, and the spinal marrow. From numerous experiments, Dr. Glover concludes that it acts primarily on the spinal cord ; that under its use the animal temperature is much increased ; that the iris is contractile to a severe extent, and that it is a powerful acro-narcotic poison, but less powerful than *Aconitum*. In all animals killed by it he observed congestion of the base of the brain.

HEAD.—Feeling as if a ligature were tightly drawn around the head ; vertigo, as if from intoxication ; dizziness, with nausea ; sensation as if the head were empty ; paralysis.

HEART.—Fainting fits of hysteric females ; palpitation of the heart, of a nervous character.

DIGESTIVE GROUP.—Inclination to vomit, with griping or sore feeling at the pit of the stomach, accompanied by head-

ache or dizziness; spasmodic, flatulent colic; distended abdomen; constipation, with hard or difficult evacuations; *sea-sickness*, and nausea from riding in a carriage.

GENITO-URINARY ORGANS.—Nervous difficulties accompanying menstruation; premature or delayed, pale, watery menses, with cramps in the abdomen; menstrual colic; *leucorrhœa*; uterine hysteria, with excitability of the sexual organs; frequent desire to urinate, with copious emission of watery urine.

MENTAL.—Depression of spirits; irascibility; hysteria with an irritable disposition.

18.—Coffæa (*Coffæa Arabica*).

HISTORY, USES, ETC.—This is the product of an evergreen shrub, about sixteen feet in height, and is extensively cultivated in the East and West Indies, and other countries, for purposes of commerce; the variety used medicinally is indigenous to the elevated regions of Arabia Felix. The fruit resembles a cherry, and when ripe is shaken from the tree and dried by the sun on mats. We obtain an alcoholic tincture from the seeds of the best Arabian coffee.

PROPERTIES AND ACTION.—It is remarkable for containing *caffeine*, the peculiar principle of coffee, which Liebig shows to be identical with *theine*, the peculiar principle of tea. "Caffeine, or a strong solution containing it, produces in man restlessness, palpitations, and other nervous symptoms. It also appears to check the metamorphoses of the animal body, as shown by the diminished formation of urea, which takes place under its use. Hence it has been proposed to administer strong coffee in various febrile diseases in which there is excessive metamorphosis of the tissues" (*Waring*).

PROMINENT USES.—*Sleeplessness of infants*; morbid sensitiveness and irritation of the *nervous system*, following unexpected or excessive joy, especially in persons of a

nervously sensitive temperament; toothache of a purely nervous character, especially at night; nervous sufferings of highly excitable children or hysterical females. Persons who take coffee as a beverage will fail to receive its full benefit as a remedial agent.

HEAD.—Headache, as if it were too full; headache, as if the brain were bruised or torn, or would fly to pieces, with heat, sensitiveness to noise and light.

SEXUAL GROUP.—Excessively severe labour-pains or after-pains; excessive excitement of lying-in females; delayed or suppressed menses, attended with colic; excited sexual propensities.

COFFEE AS AN ANTIDOTE.—In the event of poisoning by *Opium*, *Aconitum*, or other narcotic poisons, a strong infusion of coffee with a little sugar, but without milk, should be promptly given, after the stomach has been emptied, in cases of suspected poisoning in which the patient is stupified, sleepy, delirious, or insensible. In the depression consequent on drunkenness, coffee tends to neutralise the poisonous principle of alcohol, and acts as a sedative.

19.—*Colocynthis* (*Bitter Cucumber*).

GEOGRAPHY, PROPERTIES, ETC.—This plant is a native of Turkey, Egypt, North of Africa, the islands of the Archipelago, etc. It is an annual much resembling the common cucumber, but is distinguished from it by the fruit, which is of a globular shape, smooth, and of a yellow colour when ripe. *Colocynth* has been used in medicine from a remote period, and is one of the plants supposed to be the *Pakysth* or *wild gourd* of Scripture. In the allopathic pharmacopœia it is a powerful drastic and Hydragogue Cathartic. As a hydragogue it is, however, inferior to *Elaterium*. In excessive doses it is an irritant poison, causing inflammation of the mucous membrane of the intestinal canal. It acts

primarily on the large intestines, and occasionally produces griping or tormina, nausea and vomiting. In the old practice it is rarely given, except in combination with Camphor, Calomel, Hyoscyamus, etc. For homœopathic use the seeds, and the pulpy or medullary matter, yield the medicinal product from which we make a straw-coloured tincture.

PROMINENT USES.—Colic of a griping, flatulent character, with diarrhetic evacuations, the large intestines being more especially within the range of its operations; *neuralgia* affecting certain *nerves of the head and face*; *sciatica*; cramps in the muscles of the legs, etc. *Colocynth* is also useful in some gouty and gastric disorders. Although a remedy of great power, it has not a wide range of action.

HEAD.—Violent *neuralgia* of one side of the head (*megrim*), aggravated by warmth and movement; burning and stinging pains in one side of the face, extending to the ear and head; cutting pain in the eyes and head; drawing or throbbing toothache.

MENTAL GROUP.—Ill-humour, indignation, great irascibility; peevish mood, and great disinclination to speak.

DIGESTIVE ORGANS.—Squeezing or cramp-like pains in the stomach; cutting pain in the bowels, as from knives; colic relieved by bending forwards; colic with diarrhoea after the least food; diarrhoea with tenesmus; bloody stools; dysentery with cramp-like pains; blind or bleeding piles; irregular action of the intestinal or urinary organs, with colic or flatulence.

SEXUAL.—Pressure in the region of the uterus and vagina, as of labour, often with pain in the upper part of the thighs; symptoms resembling those of prolapsus or retroversion of the uterus, occurring at the monthly period, especially at about puberty; menstrual colic.

SCIATICA, ETC.—Neuralgic pains of the hips and lower extremities; stiffness of the knees, cramps in the calves of

the legs; tearing in the soles of the feet, especially if traceable to cold, or connected with gout, or violent mental emotions.

20.—Cuprum Metallicum (*Metallic Copper*).

HISTORY, ACTION, ETC.—This metal occurs pure, in a native mineral state, and in different forms, chiefly in England, Sweden, North America, etc. In its pure state it is not possessed of any medicinal action, but combined with acids it is a violent irritant poison. Even food cooked in copper vessels, by dissolving a portion of the metal, becomes highly poisonous. For homœopathic uses, it is prepared in the first instance as a trituration.

PROMINENT USES.—Partial or general convulsions; epilepsy; spasmodic affections; whooping-cough; diarrhœa, cholera; St. Vitus's dance; twitching of the muscles; piercing shrieks; paralysis; and cramps in the arms, legs, and abdomen. It is especially efficacious when any of these symptoms appear at irregular intervals, and in alternate groups.

HEAD.—Delirium; mania; epileptic fits, with foaming at the mouth, rigidity of the body and limbs; hysteria, with melancholy; muscular trembling; debility, etc.; attacks of craziness of an artful or peevish character; vertigo; violent headache; inflammation of the brain; buzzing and singing noises in the ears; pale face; sunken eyes; blue lips, etc.

RESPIRATORY GROUP.—Dry cough, taking away the breath, like *whooping-cough*, children turning blue in the face, as if suffocating; *spasmodic cough*, with rattling in the chest; croupy cough; asthma, with a feeling of painful constriction of the chest, almost amounting to suffocation, and spasmodic vomiting of mucus after the cessation of a fit.

DIGESTIVE GROUP.—Nausea; excessive vomiting, with

colic; violent cramp-like pains or pressure in the stomach or abdomen, with diarrhoea; *violent and copious diarrhoea*; *Asiatic cholera*, especially if vomiting and diarrhoea are accompanied by *convulsions of the extremities*, and pressure in the pit of the stomach.

TRUNK AND EXTREMITIES.—Jerking of the limbs during sleep; twitching of the muscles; cramps in the arms and calves of the legs, the convulsions beginning at the fingers and toes; paralysis, with weakness of the body and trembling of the limbs.

21.—*Digitalis* (*Foxglove*).

HISTORY, ETC.—Foxglove is a native of England and Western Europe, and does not appear to have been known to the ancients. Fuchsius first described it, and named it *digitalis*, from *digitus*, a finger, in consequence of the resemblance of its flowers to the fingers of a glove. It grows on pastures and exposed hill-sides, and in plantations. It blooms in June and July, and ripens its seed in August and September. The leaves, roots, and seeds are all possessed of active properties, but for homœopathic uses we employ the *leaves* only; and those of the second year, gathered just after the first flowers have expanded, are the most valuable. Those plants which have a *purplish* stem are supposed to possess most virtue.

ACTION.—In allopathic practice it first excites and then diminishes the force and frequency of the heart's action. The intestinal canal, the brain, and organs of sense, are apt to be disordered by large doses. The kidneys are often acted on, and the secretion of urine increased. It is a cumulative medicine, and on the occurrence of nausea or intermittent pulse, it should be discontinued. It has been used to control the circulation, in diseases of the heart, in fever, in inflammations, and in pulmonary affections after

the acute symptoms have subsided. It is prescribed in excitement from nervous irritability, and as a *diuretic* in dropsies of all kinds, but is most useful in those associated with a debilitated and generally diseased state of the constitution (*Royle*).

PROMINENT USES.—Organic diseases of the heart, and their consequences; aneurism; apoplexy; vertigo; jaundice; general cachectic condition. It is supposed to be more serviceable for scrofulous patients, of soft, flabby muscles, than for those of firm fibre and robust health.

HEART.—*Palpitation*; increased action of the heart, producing an oppressive sensation, with anguish and spasmodic pains. *Plethora of the heart*, with a sensation as if it were grasped; slow, irregular, and sometimes intermittent action of the heart; sense of suffocation, especially on lying down; *hypertrophy*, with or without dilatation of the left ventricle; *valvular disease*; *cyanosis* (blue disease), with anguish, orthopnoea, hæmoptysis, and blueness of the eyelids, lips, tongue, and nails; hydrothorax and ascites, from organic lesion of the heart; dropsy of the pericardium; aneurism of the aorta.

RESPIRATORY GROUP.—Asthma; spasmodic cough; hæmoptysis; pulsation or pain, with a feeling of constriction in the chest; arterial throbbing in the right side of the chest; pain in the chest, especially on coughing.

22.—*Drosera Rotundifolia* (*Round-leaved Sundew*).

NATURAL HISTORY, ETC.—This plant is indigenous to elevated situations in Great Britain and most of the temperate climates, and even near the tropics, and flourishes in mossy, turfy bogs. It is called *Drosera* (*dewy*), in consequence of its being covered with glandular hairs, giving the plant an appearance as if covered with dew. For homœopathic purposes we express the juice from the whole plant, gathered in July, from which we make the tincture.

PROMINENT USES.—Catarrhal affections after croup; *hooping-cough*, especially in the convulsive stage, and after the use of *Ipecacuanha* and *Belladonna*; also in cough with a tickling sensation in the throat; *hoarseness*; vomiting, or wheezing breathing, and a sensation of suffocation; early stage of phthisis, especially of the larynx.

FEVER.—Intermittent fevers with much shivering; vomiting during the chilly stage of ague; fever with headache; night perspirations; dizziness in the open air.

RESPIRATORY GROUP.—Chronic hoarseness after repeated catarrhs; incipient laryngeal phthisis with emaciation; cough with vomiting; tickling in the larynx, inducing a hacking cough; night cough; cough, with expectoration of blood; *hooping-cough*, sometimes with bleeding from the mouth and nose; *hooping-cough*, especially in the second and third stage, with warm perspiration (cold perspiration points to *Veratrum*); chronic bronchitis; wheezing breathing, with a suffocative sensation.

23.—*Dulcamara* (*Woody Nightshade*—*Bitter Sweet*).

NATURAL HISTORY, ETC.—This plant is indigenous to every temperate latitude, flourishing in moist shady hedges and thickets, or on the banks of ditches or streams. The root is woody, the stem shrubby, with climbing branches, attaining, when supported, to the height of from eight to ten feet. It has acquired its name from *dulcis*, sweet, and *mara*, bitter, owing to the characteristic transition of tastes which it yields when chewed.

PARTS USED.—For medical purposes we employ the young branches and leaves of the plant when it commences flowering. The roots are said to possess the same properties as the annual stems, which are taken up both by water and spirit.

PROMINENT USES.—Various affections resulting from *damp*,

or a thorough wetting, such as cold in the head, nausea, *diarrhœa*, itching and stinging *eruptions on the skin*, rheumatism, with pains worse during rest, and relieved by movement, and other conditions following a *cold*. If this medicine be taken immediately after exposure to damp, it will often prevent the ordinary consequences of a cold.

SKIN.—Stinging and burning eruptions of different parts; *acute and chronic urticaria*; severe itching vesicles upon a red base; suppurating, humid, corrosive tetter, forming crusts, or dry and peeling off; warts and scurfy eruptions, particularly upon the face; dropsy after exposure to cold.

CATARRHAL AILMENTS.—Cold in the head with dryness of the nose and headache; asthma from repelled eruptions; acute and chronic bronchitis, with abundant expectoration; rheumatic deafness and amaurosis; bronchial disorders after measles.

DIGESTIVE GROUP.—Derangement of the intestinal functions, with dirty, white-coated tongue; nausea, or flatulent distension of the abdomen; *diarrhœa* from cold, with colic, particularly in children and in the summer, with nocturnal watery or slimy evacuations; chronic bloody *diarrhœa*.

URINE.—Catarrh of the bladder; foetid-smelling urine; burning in the urethra, with difficult urination.

GENERAL DISEASES.—Attacks of rheumatism, particularly of the upper extremities; catarrhal and rheumatic fevers; violent lancinating aching pains in the arms and back, especially at night, and during repose, but which are relieved by movement.

24.—*Ferrum Metallicum* (*Pure Iron*).

GEOGRAPHY, PROPERTIES, ETC.—Iron is a metal which is more generally diffused over the globe than any other, and has been known from time immemorial. It occurs native in small quantities, seldom pure, generally oxidized, and

united with acids; such as the carbonic, phosphoric, arsenic, etc. Iron is distinguishable in the residue of the combustion of many plants, and it forms an important constituent of the blood, and other parts of the animal organism. It is extracted from its ores principally by the agency of heat, charcoal and fluxes.

For homœopathic purposes the filings of pure metallic iron are used, perfectly free from rust, from which we make triturations, with a dry, warmed pestle and mortar, observing the greatest care that during this process the iron does not become oxidized.

“According to allopathic physicians, iron is a nervous tonic. This is one of those superficial statements of which old-school treatises on materia medica abound. So far from iron being a tonic, it has, on the contrary, a debilitating and disintegrating effect upon the system. It is no more a tonic than *Arsenic* or *China*. The first effect of iron may be to cause an apparent stimulation of the vital functions, but the physical condition of those who live near iron springs might have sufficed to enlighten physicians concerning the ultimate debilitating effect of iron. We find these people tainted with chronic diseases more than almost any other class of men, even when their mode of life is otherwise unexceptionable. A general or partial debility, bordering upon paralysis, certain violent pains in the extremities, various affections of the abdominal viscera, vomiting of food day and night, pulmonary phthisis, bloody cough, want of animal heat, menstrual suppression, miscarriage, impotence, sterility, jaundice, and other symptoms of cachexia, prevail among them” (*Hempel*).

Certainly, if iron be capable of producing results so disastrous to the human organization, it must be regarded as a poisonous agent, and its extravagant or untimely administration should therefore be guarded against.

In homœopathic practice, *Ferrum* has not been at present

very extensively employed, probably in consequence of its physiological action not being sufficiently appreciated. As far as it is understood, the following may be stated as its

PROMINENT USES.—Indigestion, diarrhoea, fluent piles, etc.; anæmia from profuse losses, or as a symptom of general cachexia; debility from loss of fluids; dropsy from liver complaint, or abuse of cinchona; milky leucorrhœa; nocturnal emissions; impotence; sterility; prolapsus of the vagina; *chlorosis*, with painful, irregular, scanty, pale, or suppressed menses; ailments from the abuse of Peruvian bark, or tea; consequences arising from sexual excesses.

25.—Graphites (*Black Lead, Carburet of Iron*).

HISTORY, ETC.—The name is derived from the Greek word *grapho* (to write); it is used for pencils, and the best comes from Cumberland. Its components are not uniform. It is first prepared for use by *trituration*, which has to be made with great care.

PROMINENT USES.—Its action upon the skin is very marked, especially in various forms of chronic tettery diseases of the skin and its appendages; chronic eruptions; tuberculous affections; chronic cough; weakness of the stomach; constipation. In many points it corresponds with the action of *Calc.*, *Hepar Sulph.*, *Silic.*

SKIN.—Unhealthy, trifling itching pimples leading to ulceration; dryness of the skin; chronic erysipelas; herpes crustaceous; foetid perspiration of the feet; old ulcers with torpid and callous edges, with a foetid, ichorous discharge; humid tetter; painful warts; chafing and soreness of the skin between the fingers, toes, and thighs.

HEAD.—Itching of the scalp, and falling off of the hair; humid and scabby eruptions; headache, especially in the morning on waking; vertigo; pain in the bones of the

face; itching, redness, watering, and agglutination of the eyelids; deafness.

SEXUAL.—Derangement of the monthly period; itching in the parts, or itching and smarting eruptions on the organs; swelling of the testicle.

26.—*Helleborus Niger* (*Black Hellebore, Christmas Rose*).

NATURAL HISTORY, ETC.—This is a perennial plant, flowering in the winter, from December to March; hence its name, Christmas Rose. It is called "*black hellebore*" from the colour of its roots. *Helleborus* grows in the shady woods of the lower mountains of most parts of Europe, that used for homœopathic purposes being chiefly obtained from the central and southern parts.

The *fresh* root, which is dug up about Christmas, is the part used, from which a brownish straw-yellow tincture is prepared.

PROMINENT USES.—Disorders of the brain and its serous coverings; mental and nervous affections; dropsy after scarlet fever, etc.

SKIN.—Various forms of dropsy affecting the brain, chest, abdomen, sexual organs, cellular tissues, etc., especially in strumous children, after scarlatina or measles, or some acute affection of the serous membranes. It is not indicated in dropsy from organic disease of the liver and kidneys.

HEAD.—*Hydrocephalus* (water on the brain), especially in children of a weak impoverished appearance and lax fibre, or that occurs as the *sequela* of some acute eruptive disease; dulness, heaviness, stupefaction; headache: pale and œdematous swelling of the face.

DIGESTIVE GROUP.—Nausea; eructations; vomiting of green or blackish substance, with colic; gurgling in the intestines; diarrhœa with colic and tenesmus; watery evacuations; jelly-like motions; summer cholera.

GENITO-URINARY GROUP.—Diminished secretion of urine, with general anasarca, and probably hurried or slow laboured breathing. Menstrual suppression with œdema or dropsy of the abdomen.

27.—Hepar Sulphuris (*Sulphuret of Lime*).

PREPARATION, ETC.—Although this compound exists in nature, for homœopathic uses we obtain an artificial preparation by calcining in close vessels equal proportions of sublimed sulphur and minutely pulverised oyster shells, from which we make first a trituration, and afterwards a tincture.

PROMINENT SYMPTOMS.—Skin and glandular diseases; inflammatory affections of the windpipe and air-cells, as in croup (in which it often acts most beneficially by arresting the tendency to effusion); consumptive coughs; *scrofulous enlarged glands*, and *scrofulous affections generally*; *chronic dyspepsia*; salivation and other consequences resulting from an excessive use of mercury. It is milder in its action than *Sulphur*, and often more suitable in cachectic conditions. *Hepar Sulphuris* promotes the *suppurative process* to an extent, probably, beyond any other known remedy.

SKIN.—Disposition to ulcerate from the least injury; unhealthy or chapped skin; nettle-rash; boils, pimples, chilblains, whitlows; erysipelatous inflammations; falling off of the hair, particularly after the abuse of mercury; yellow colour of the skin.

HEAD.—Headache in the forehead, with vertigo, especially in the morning and evening; nervous irritability; anxious and frightened dreams, or starting from sleep; *scrofulous ophthalmia*; inflammatory redness and swelling of the eyes, and glueing together of the lids in the morning; discharge of pus from the ears, sometimes foetid; pain in the bones of the face from abuse of mercury; darting, jerking toothache; loose, inflamed, and readily-bleeding gums.

RESPIRATORY ORGANS.—Rawness, roughness, or scraping sensation in the throat; *hoarseness*; dry, deep, and severe cough, particularly in the evening, and easily excited by exposure to cold; croup, (after *Acon.* and before *Spong.*); chronic bronchitis with anxious, wheezing respiration on lying down; difficult breathing, and spasmodic constriction of the chest; cough affecting the head, followed by sneezing or crying.

DIGESTIVE GROUP.—Nausea, waterbrash, heartburn, with pressure and tension in the region of the stomach after food; frequent and easily-deranged stomach; difficult motions; diarrhœa, clay-coloured or bloody evacuations.

GENITO-URINARY ORGANS.—Irritation of the urethra, burning urine, and discharge of mucus; weakness of the sexual organs; escape of prostatic fluid during or after stool; delayed menses, and itching during the flow; leucorrhœa with smarting.

BACK.—Weakness of the spine; bruised or darting pains in the back and limbs; ulceration and suppuration of the axillary glands; cramps in the legs and feet; cold sweating feet; aggravation of pains at night.

28.—*Hyoscyamus Niger* (*Common Henbane*).

GEOGRAPHY, VARIETIES, ETC.—This plant is indigenous throughout Europe, growing in uncultivated places in the neighbourhood of farms, villages, and roadsides. The plant may be easily recognised by the foetid odour which is exhaled when it is handled and pressed. There are two varieties cultivated at Mitcham, one annual and the other biennial; the latter is preferred for homœopathic purposes, the fresh shoots and leaves gathered at the time of flowering yielding the medicinal product from which the tincture is prepared.

Hyoscyamus and *Belladonna* appear to exhibit analogous

properties, but in some respects they differ most essentially, especially in their action upon the nervous and vascular systems. *Hyoscyamus* has little of that power of exciting local inflammation which is so marked in the action of *Belladonna*. It reduces the irritability of the heart and lowers the pulse; *Belladonna* has the reverse effect.

MEDICINAL ACTION.—In allopathic practice it is given to soothe irritation in the system, allay pain, and relieve spasm, and is preferable to opium, as it does not cause headache, confine the bowels, or check secretions. *In poisonous doses*, it causes sickness, stupor, dimness of sight, a hard pulse, dilatation of the pupil, delirium, coma, and, gradually, as the pulse becomes weak and tremulous, death takes place.

PROMINENT USES.—The action of *Hyoscyamus* is chiefly expended on the brain, to several severe affections of which it is strictly homœopathic; especially derangements characterized by convulsions, spasmodic affections, sleeplessness, delirium, transient amaurosis, etc.

MENTAL GROUP.—Delirium of various kinds—furious, muttering, incoherent; jealousy; rage; grasping at flocks, or picking at the bedclothes; desire to get up in brain fever. Illusions of sight; far-sightedness or the reverse; obscuration of sight; wakefulness, alternating with deep sleep; startings in sleep, and grinding of the teeth.

HEAD.—Dizziness; inflammation of the brain; stupifying headache; headache, especially in the forehead; bluish or red swollen face; spasmodic closing of the eyelids and nocturnal blindness; red and glistening eyes; squint (recent); tearing toothache with congestion to the head; partial or entire paralysis of the tongue and throat; difficulty in swallowing; dread of drinking.

RESPIRATORY GROUP.—Dry, spasmodic cough, as if produced by tickling in the throat, especially at night, when lying down, but relieved by sitting-up in bed; whooping cough

with paroxysms, especially at night; cough of hysterical persons; difficult breathing; spasms of the chest.

DIGESTIVE ORGANS.—Nausea, vomiting, or bitter eructations; colic with flatulent distension; frequent passing of thread-worms; painless and watery diarrhoea, especially when associated with hysteria or typhus.

URINARY GROUP.—Retention of urine; involuntary emission; paralysis of the bladder. Profuse menstruation with hysteric symptoms; puerperal fever and mania.

GENERAL DISEASES.—Fits of fainting; convulsions; St. Vitus's dance; hydrophobia; epileptic or hysteric convulsions.

29.—*Ignatia Amara* (*St. Ignatius' Bean*).

HABITAT, DESCRIPTION, ETC.—This seed is yielded by the *Strychnos Ignatii*, a climbing bush, which, like the *Strychnos Nux Vomica*, grows on the islands of the extreme eastern or south-eastern coasts of the continent of Asia, especially on the Philippine Islands, and has long been used in India. The fruit of the *Strychnos Ignatii* is of the size of a small melon, or of a large pear, ovoid, smooth, and contains from fifteen to twenty irregular-shaped, hard seeds, scarcely an inch long, of a pale-brown colour, and striated on the outside; inodorous, but very bitter, and contain a larger quantity of strychnia than the *Nux Vomica* seeds.

For medicinal purposes we use the seeds, from which we obtain a pale, straw-coloured, very bitter tincture.

IGNATIA AND NUX VOMICA.—The action of *Ignatia*, although very powerful, is less violent than that of *Nux Vomica*. “*Ignatia Amara* appears to operate more especially upon the gastric and intestinal mucous membrane, although it does also act upon the ganglionic system; whereas the *Strychnos Nux Vomica*, which contains the same chemical components,

or nearly so, but in different proportions, operates more especially upon the ganglionic system" (*Spillan*). Hahnemann points out the characteristic difference between the action of these remedies as consisting in their different manner of influencing the mind. "Whatever analogy may be perceived between the positive effects of *Ignatia* and *Nux Vomica*, there is also a great difference, since the moral condition to which one is adapted is essentially different from the moral condition to which the other seems to correspond. The St. Ignatius' bean does not by any means suit persons or affections characterized by anger, vehemence, or a violent disposition; on the contrary, it is required when *sudden changes* from mirth to tears, etc., prevail."

PROMINENT USES.—Consequences of deep-seated emotions, especially grief, in persons, females particularly, of an exalted excitability of the nervous system, who often sink from the highest spirits to the lowest state of despondency; hysteric, convulsive, or spasmodic disorders, consequent on fright or ill-humour; feeling as of a ball rising in the throat (*globus hystericus*); various nervous affections of infants, girls at puberty, and women at the critical period.

SKIN.—Itching of the skin relieved by scratching; urticaria; sensitiveness to a draught of air.

HEAD.—Nervous headache; megrim; headache aggravated by stooping, relieved by lying on the back; paroxysms of headache, as if a nail were being pressed into the brain; violent neuralgia of the head; sensitiveness to the glare of light; horrid dreams; hysteric convulsions.

MORAL GROUP.—Hysteria and hypochondria; sad, silent mood; brooding over deep-felt emotions; great fitfulness of temper; very acute sensibility; *alternate sadness and gaiety*.

EYES, ETC.—Feeling as of sand in the eyes; scrofulous ophthalmia, agglutination of the lids; photophobia, without any apparent signs of inflammation; convulsive movements

of the eyes and lids; ulcerated nostrils; fluent, followed by dry, coryza; soreness of the inner mouth; increase of saliva.

RESPIRATORY ORGANS.—Sensation as of a lump or ball rising in the throat; convulsive, spasmodic cough, especially on waking; constriction of the chest; dyspnoea at night; stitches in the chest, especially on the left side; palpitation of the heart.

DIGESTIVE GROUP.—Distress at the stomach, caused by food; rising of food or of a bitter liquid, with bad taste in the mouth; nausea; hiccough after eating; flatulent colic; periodical spasms, particularly in hysteric persons; sensation in the stomach as if occasioned by want of food; mucous stools; constipation from cold; itching, creeping, or *prolapsus* of the rectum; thread worms.

GENITO-URINARY GROUP.—Pressure on the bladder; frequent, profuse, *watery* urine; expulsive, bearing-down pressure on the uterus, as in labour; premature, profuse, offensive menses; acrid and corrosive leucorrhœa.

30.—Iodium (*Iodine*).

NATURAL HISTORY, ETC.—This is an elementary substance, so called from *Iodès* (violet colour), on account of the beautiful and characteristic blue colour of its vapour. It exists in the mineral and vegetable kingdoms, and largely in marine plants. Iodide of silver, and iodide of mercury are found in nature, in sea-water in minute quantity, and in some springs; also in the algæ, sponge, corals, various polypi, etc. It is chiefly obtained from incinerated sea-weed or kelp. Coindet, who first instituted inquiries concerning the curative properties of *Iodine*, found that the therapeutic virtues of *Spongia* were due to the presence of *Iodine* in that substance.

Although *Iodium* has been very much abused by allopathic practitioners, it has been well observed that they very often

successfully prescribe it for the very derangements which they describe in their works as the injurious effects of iodine to be guarded against in practice. It is even recommended as a specific remedy in many diseases in which its curative virtues entirely depend upon its being homœopathic to the malady.

PROMINENT USES.—Scrofulous affections; inflammation of the larynx and trachea; abdominal phthisis; ozœna; chronic diarrhœa in scrofulous persons.

SKIN.—Glandular swellings and indurations; dry, rough skin, and unhealthy eruptions, especially in strumous persons; early-morning perspirations; goitre; ganglia; ranula; swelling of the inguinal glands; hydrocele and ovarian cysts.

RESPIRATORY GROUP.—Chronic inflammation of the larynx, with hoarseness; chronic sore throat; dry short cough, with frothy or bloody expectoration; chronic bronchitis; *croup*, especially when the exuded lymph begins to consolidate, with suffocative and croupy inspiration; diphtheria; phthisis.

INFLAMMATORY GROUP.—Fever, with alternate chills and flashes of heat, or delirium and grasping at flocks; hectic fever; pleurisy in patients of a strumous constitution, and especially if effusion into the pleural cavity seem to have taken place.

SEXUAL.—Chronic, corrosive leucorrhœa; ovarian dropsy; premature or delayed menses in scrofulous females; atrophy or indurations of the testes; impotence; hydrocele.

EXTREMITIES.—Scrofulous inflammation of the joints, with pains and suppuration; white swelling of the knee; rheumatic pain and swelling in the limbs and joints; *gangrena senilis*.

ADMINISTRATION.—*Iodine* may be administered in tincture, two to three drops in an ounce of water; or by inhalation; or applied locally as a lotion; or painted over the affected surface. For chronic scrofulous or syphilitic affections, the preparations are preferable.

31.—Ipecacuanha (*Cephælis Ipecacuanha*).

NATURAL HISTORY, ETC.—This is a creeping herbaceous perennial plant, growing plentifully in the wooded tracts of Central South America, particularly Brazil. Its root is the Ipecacuanha (*Radix Ipecacuanha*) of commerce. For medicinal purposes the full-coloured or dark roots should be chosen; those without colour or without circular rings should be rejected. Ipecacuanha root, when entire, is from two to three inches long, about the thickness of a goose-quill, and when fresh, is of a pale-brown colour externally.

MEDICINAL ACTION.—As an emetic, in allopathic practice, it is considered mild and safe; it does not operate so rapidly as some emetics, and does not leave that amount of depression which follows the use of *Tartar Emetic*. It is to be preferred when vomiting is requisite in delicate patients and in children; for the latter, the vinum Ipecacuanhæ, in doses of ℞xx.—fl. dr̄m. j., till it cause vomiting, is recommended. Some persons, from idiosyncrasy, are unable to take Ipecacuanha; in such, even the smell of the powdered root produces a distressing sense of suffocation (*Waring*). The root is almost inodorous, but pulverised it has an unpleasant nauseous smell, producing in some persons violent sneezing; in others dyspnoea, resembling asthma.

"If I remain in a room where the preparation of Ipecacuanha is going on, for instance, making the pulverized Ipecacuanha comp.," writes Mr. Roberts, surgeon, to Pereira, "I am sure to have a regular attack of asthma. In a few seconds dyspnoea comes on in a violent degree, attended with wheezing, and great weight about the præcordia. The attack generally remains about an hour, but I obtain no relief until a copious expectoration takes place, which is invariably the case; after the attack is over, I suffer no further inconvenience. I have always considered that the attack proceeds from the minute particles of Ipecacuanha floating in the atmosphere, acting as an irritant on the mucous membrane lining the trachea and bronchial tubes. In some cases the mere odour of the root seems to excite difficulty of breathing, with a feeling of suffocation."

Many other persons are equally sensitive to the action of this drug.

The action of *Ipecacuanha* upon the pneumogastric nerve is very striking. "How singular it is," says Dr. M. Hall, "that *Ipecacuanha*, taken into the bronchia, should excite asthma, and taken into the stomach should induce another affection of the respiratory system, vomiting." But, as Hempel remarks, there is nothing singular in this at all. *Ipecacuanha* acts upon the various ramifications of the pneumogastric nerve, and upon all these it acts alike—as a spasmodic irritant, producing asthma in the air-passages, and vomiting in the stomach.

PROMINENT USES.—*Affections of the respiratory organs and stomach*; hurried, difficult, spasmodic, suffocative breathing; nausea, vomiting, and diarrhoea. *Periodicity* in the symptoms is a marked indication, also their occurrence at *night*.

"*Ipecacuanha*," says Hahnemann, "is used with advantage in affections against which nature herself makes some efforts, but is too powerless to effect the desired object. In these affections *Ipecacuanha* presents to the nerves of the upper orifice of the stomach the most sensitive part of the organs of vitality, a substance that produces a most incongenial disgust, nausea, anxiety, thus acting in a similar manner to the morbid material that is to be removed."

HEAD.—Headache with a bruised feeling, and with nausea; headache with bilious derangement; pain in the forehead, stoppage of the nose, with frequent sneezing; hæmorrhage from the nose.

FEVER GROUP.—Chilliness, with a sensation of external cold and internal heat; *intermittent* fever, with prominent gastric disturbances; heat in the head and body, with cold hands and feet.

HÆMORRHAGE.—In bleeding from various organs, attended with sickness and paleness, *Ipecacuanha* may often be administered with prompt and permanent benefit.

RESPIRATORY GROUP.—Here it has a most marked action. Coughs of a spasmodic, suffocative character, as if excited by tickling in the throat, sometimes with nausea, vomiting and headache; rattling of mucus in the air-passages; ordinary catarrhal coughs; spasmodic asthma, especially at night, with deathly paleness, anguish, and dread of death; whooping-cough, during the spasmodic stage, with rattling suffocative breathing; hæmorrhage from the lungs.

DIGESTIVE ORGANS.—Vomiting of food, mucus, or bilious matter; loss of appetite; want of tone in the stomach; bilious and neuralgic colic; nausea, vomiting with diarrhoea; distressing sensation of sickness at the pit of the stomach; colic of children; diarrhoea, with frothy, slimy, green evacuations; dysenteric stools, either tinged with blood or consisting of bright blood only; burning pain at the anus, as in piles, with profuse bleeding from the hæmorrhoidal vessels.

GENITO-URINARY GROUP.—Scanty, red urine, with brick-dust sediment; hæmorrhage from the urethra, especially when accompanied with nausea. Profuse menstruation of bright-red blood; hæmorrhage after parturition, with sickness at the stomach; miscarriage (preventively) when preceded by pressure towards the uterus, sickness, dizziness, paleness, and coldness.

32.—*Lycopodium Clavatum* (*Club Moss*).

HABITAT, PREPARATION, ETC.—This plant grows on mountain heaths and pastures, in woods, etc., over the whole of Europe. We employ the pollen or powder which is sold under the name of *Sporulae Locopodii*, from which we prepare a trituration or tincture. This powder has been considered inert, and so it probably is, to a great extent, until its medicinal properties are developed by processes peculiar to homœopathic pharmacy. The high dilutions—

the 6th, 12th, and 30th—are considered by many as the most efficient.

PROMINENT USES.—Chronic affections of the digestive organs; pain, sensitiveness, or distended abdomen; chronic constipation; affections of the urinary organs; itching eruptions; glandular and scrofulous swellings.

It is especially adapted to lymphatic constitutions, women in particular, subject to mucous discharges.

SKIN.—Burning itching in different parts, particularly in the evening and in bed; herpetic spots; chilblains; glandular swellings; boils, returning periodically; humid suppurating herpes, full of rhagades, and covered with thick crusts; ulcers.

HEAD.—Rheumatic headache; headache from vexation; loss of hair from an illness; *tinea capitis*, foetid suppurating or coherent crusts, forming one mass with the hair.

RESPIRATORY GROUP.—Chronic cough, particularly at night, dry or with purulent expectoration; slight exertion causes shortness of breath; stitches in the left side; palpitation of the heart.

DIGESTIVE ORGANS.—Loss of appetite or excessive hunger; swelling and ulceration of the gums; chronic sore or ulcerated throat; pain in the stomach after taking food, or after a cold; heartburn; flatulence; ascites; *chronic constipation*, with straining and hard evacuation.

GENITO-URINARY GROUP.—Incontinence of urine, more especially nocturnal enuresis of children, depending upon worms or some other irritant; urging to urinate; gravel. Deficient sexual power; nocturnal emission; leucorrhœa.

33.—*Mercurius Corrosivus* (*Bichloride of Mercury*).

PROPERTIES, ETC.—This, the most poisonous and corrosive of all mercurial salts, is white, transparent when recently prepared, opaque after it has been exposed to the air, of an

astrigent, biting, and burning taste, soluble in water, and still more so in alcohol.

PROMINENT USES.—Dysenteric affections and syphilitic diseases.

SKIN.—Syphilitic eruptions (secondary); lepra; psoriasis; herpes; maculæ; papulæ; ulcers; red or copper-coloured spots; chronic cutaneous eruptions.

BONES.—Nodes, caries, rickets; chronic articular rheumatism, and generally, chronic affections of the osseous system.

EYES.—Scrofulous, rheumatic, and syphilitic ophthalmia, with great sensitiveness to light; ulceration of the cornea; cataract; amaurosis.

DIGESTIVE GROUP.—*Dysentery*, with extreme *tenesmus*, burning in the abdomen, and discharge of blood and mucus; ulceration of the bowel, with watery or bloody diarrhœa, cutting and burning pains in the bowels, and tenesmus.

SEXUAL GROUP.—Gonorrhœa with biting pain on urinating, and stitches through the urethra; seminal emissions from sexual vices.

34.—*Mercurius Solubilis* (*Black Oxide of Mercury*).

PREPARATION, ETC.—This is a greyish black powder, insoluble in water, which is subject to decomposition, and the separation of metallic mercury by prolonged exposure to light. Triturations are made up to the third or even to the sixth attenuation. If higher dilutions are required, they are prepared by means of alcoholic tinctures, in the ordinary manner.

There are many preparations of mercury used by homœopathic practitioners, but three only are prescribed in this work, *Mercurius Solubilis*, *Mercurius Iodatus*, *Mercurius Corrosivus*. The latter has already been considered.

MEDICINAL ACTION.—When taken in moderate (allopathic) doses, they increase the action of the various ~~secreting~~

glands and organs, stimulating some, the salivary glands and liver in an especial manner. *Mercury* causes, in many constitutions, a great amount of irritability, and extreme susceptibility to all impressions. Long continued, it produces a specific action on the salivary glands, called salivation or ptyalism. The biliary secretion is increased, the blood is impoverished; Dr. Farre considering that it destroys the red blood globules, as surely as they may be by venesection. A good idea of the value of *Mercury* may be learned from the following enumeration of the ill effects of its excessive employment. 1. *Gripping and purging*. 2. *Sore throat, ulceration or mortification of the tonsils*. 3. *Violent salivation*. 4. *A renewal of salivation at a future period*. 5. *Various eruptions of the skin*. 6. *Erethismus Mercurialis* (great depression, anxiety, irregular action of the heart, etc). 7. *Rheumatic pains and nodes*. 8. *Mercurial palsy*. 9. *Cachectic mercurialis* (abridged from *Waring*).

Few drugs have exerted a more beneficial action on man than mercury, when correctly chosen, and administered in suitable doses. In allopathic hands, however, no drug, excepting, perhaps, *Opium*, has scattered such wide-spread devastation in its path. In homœopathic hands this potent agent does good without doing harm. “Hahnemann’s provings of *Mercury* constitute one of the brightest pages of his *Materia Medica Pura*, and teach with great certainty in what diseases we may depend upon *Mercury* as a curative agent.”

PROMINENT SYMPTOMS.—*Mercurius Solubilis** is specially useful in sore throat with ulceration and swelling; glandular swellings and suppuration; syphilitic, scrofulous, or catarrhal ophthalmia; painful tearing in, and discharge of pus from, the ears; syphilitic and scrofulous swellings of the inguinal

* *Mercurius Solubilis* and *Mercurius Vivus* (quicksilver), are prescribed by many homœopathic physicians indifferently, the effects of both being nearly identical. The latter we have found most useful in catarrhal affections.

glands, sometimes with suppuration; syphilitic ulcers, etc. Two indications for the use of this remedy are, aggravation of the pains and general symptoms in bed at night, and perspirations, which afford no relief.

SKIN.—Jaundice; itching eruptions having an ulcerative tendency; itching aggravated by the warmth of bed; healthy or malignant suppuration; inflamed, swollen, and suppurating glands, particularly in the groin; syphilitic eruptions; eruptions readily bleeding; suppurating stage of small-pox.

FEVER.—Frequent chills and shivering, *profuse perspirations without relief*. Rheumatic, bilious, or catarrhal fevers.

HEAD.—Rheumatic and catarrhal headache; bilious headache; itching and humid eruptions on the scalp; headache, especially at night; pains in the bones of the skull, worse at night.

EYES.—Ophthalmia; inflammatory affections with itching, soreness, and burning; yellow-tinge of the whites of the eyes; ulcers in the cornea; agglutination of the lids.

EARS.—Tearing or sticking pain; soreness and excoriation in the internal ear, and sometimes with discharge of pus or blood; roaring and buzzing noises; swelling of the parotid gland.

NOSE.—Cold in the head, coryza, sneezing, dry, or with copious discharge of watery or corrosive mucus.

FACE.—Yellow, clay-like complexion; swelling of the face with toothache; cracks or ulcerations of the lips and corners of the month.

TEETH AND GUMS.—Looseness of the teeth and swelling of the gums; scurvy, with spongy or bleeding gums; pain in decayed teeth, of a tearing, darting, throbbing kind, especially at night, increased by eating and in the warmth of bed; the teeth feel too long and loose; inflamed, swollen, ulcerated, easily bleeding gums.

MOUTH AND THROAT.—Profuse flow of saliva with a foetid

smell; thrush; ulcers and sores in the mouth; inflammation of the tongue. Painful dryness of the throat with frequent urging to swallow; swollen and elongated uvula; inflamed, swollen, and ulcerated tonsils (quinsy); syphilitic ulcers, the soreness extending to the ears and the glands of the throat and neck, the pains being aggravated at night, in cool air, and by talking.

RESPIRATORY GROUP.—Catarrh, with chilliness; shrinking from the open air; hoarseness; racking cough with expectoration; inclination to vomit, and pain in the side during inspiration.

DIGESTIVE ORGANS.—Eructations; sweet, foul, bitter, saltish, or metallic taste in the mouth; nausea, with giddiness and headache; swelling, hardness, and ulcerative pain in the right side (liver); heartburn; colic from cold; flatulence. Constant desire to relieve the bowels; chilliness preceding every motion; clay-coloured evacuations: dark-green, bilious, frothy motions, with nausea and eructations; thread-worms.

GENITO-URINARY GROUP.—Frequent and copious discharge of urine, as in diabetes; frequent ineffectual desire; burning and smarting urine, emitted drop by drop; foetid or bloody urine; inflammation of the urethra; gonorrhœa. Greenish leucorrhœa; tormenting eruptions; suppression of the menses; ulcerations and swellings at the breast.

BACK AND EXTREMITIES.—Stiffness in the nape of the neck; rheumatic pain in the joints and limbs; swelling of glands of the neck, groin, etc.

GENERAL SYMPTOMS.—*Mercurius* is specially adapted to lymphatic persons disposed to catarrhal or rheumatic affections from slight exposure, with a disagreeable odour from the breath, and who easily perspire, without being relieved by it; the pains and general symptoms are worse at night, and especially in the warmth of bed; and, lastly, it is more particularly adapted to the affections of females than males.

35.—Nitricum Acidum (*Nitric Acid*).

PREPARATION.—This is a colourless liquid, excessively acid and corrosive, and is a most effective oxidizing agent. It is prepared by the action of sulphuric acid on nitrate of potash. It makes a permanent yellow stain upon the skin, which, unlike that produced by iodine or bromine, can scarcely be removed. For medicinal use it has to be purified to free it from all traces of sulphuric or muriatic acid, with which it is frequently mixed.

MEDICAL PROPERTIES.—Strong nitric acid is a powerful caustic and escharotic. The dilute acid is tonic, alterative, and refrigerant, and is recommended (allopathically) for renovating the strength and raising the tone of the constitution after a long course of *Mercury*.

PROMINENT USES.—Chronic scrofulous or syphilitic diseases; chronic rheumatism; diseases of the *bones*; various affections due to the abuse of *Mercury*. It is stated to be most useful in chronic diseases and in persons who are habitually troubled with mucons discharges, and, according to Hahnemann, rarely to those of a constipated habit.

SKIN.—Syphilitic eruptions; itching eruptions like nettle-rash; brownish-red spots on the skin; warts; painful corns and chilblains; foetid sweat of the feet.

EYES, ETC.—Purulent ophthalmia of a gonorrhœal or syphilitic origin; inflammatory affections of the eyes, consequent on the abuse of mercury; dimness or loss of sight. Deafness; discharge from the ear; noises in the ear; and other affections of a strumous or syphilitic nature.

NOSE.—Yellow foetid discharge from the nose; *syphilitic ozaena*; foetid smell in the nose; stoppage of the nostrils.

FACE.—Pain in the bones of the face; pale face.

MOUTH AND THROAT.—Ulceration, salivation, with foetid odour from the mouth; sloughing of the mucons membrane,

loose teeth, and spongy bleeding gums, from abuse of mercury; smarting pain in the throat; hoarseness; sensation when swallowing as if the throat were raw or ulcerated.

RESPIRATORY GROUP.—Dry, barking cough, especially in the evening, with purulent or bloody expectoration; shortness of breath, with palpitation on slight exertion.

DIGESTIVE GROUP.—Loss of appetite; emaciation; chronic diarrhoea, with soreness of the bowels; fistulous and hæmorrhoidal affections; itching and burning of the anus.

GENITO-URINARY GROUP.—Enuresis, with foetid or purulent urine; ulcers in the urethra. Syphilitic affections of the genital organs; condylomata on the sexual organs and anus (internal and external use); relaxation of the scrotum; deficient sexual power; nocturnal emissions. Leucorrhœa of a foetid or corroding nature, especially scrofulous or syphilitic.

36.—*Nux Vomica* (*Strychnos Nux Vomica*).

NATURAL HISTORY, ETC.—This is the seed of a tree of considerable size, indigenous to the Indian Archipelago, Southern India, Ceylon, etc. The fruit is a smooth berry, of the size of a large apple, of a beautiful orange colour, containing several circular flat seeds, covered with fine hairs. For homœopathic purposes we use the seeds (*nucēs vomicæ*), from which, when pulverized, we prepare a tincture or trituration.

MEDICINAL ACTION.—The *Nux Vomica* is a most active poison, even more violent than *arsenious acid*, and is more or less destructive to all animated nature. It produces tetanic convulsions, which affect both the limbs and the trunk of the body, increased sensibility to external impressions, asphyxia, by suspending the action of the muscles of respiration, and death. The spinal cord is the part chiefly affected, although probably every part of the nervous system is specifically acted on by it.

PROMINENT USES.—Gastric and bilious derangements, constipation, paralytic or spasmodic affections, etc., especially from sedentary habits, too close mental application, night watching, the use of tobacco or alcoholic beverages. It is an excellent remedy in many varieties of sick headache, especially if caused by excessive habitual eating, the use of coffee and spirits, too much mental labour, and too little out-door exercise.

“Nux Vomica has a very marked action on the nervous system generally; but especially upon the spinal cord, and upon those nerves which are connected with the digestive organs. It is one of the most valuable remedies prescribed in the treatment of the digestive functions, and is very generally indicated in most cases of inaction of the bowels, dependent upon want of nervous energy. It is suited to persons of a bilious constitution, with a dark, sallow complexion, and hasty, irritable, or hypochondriacal disposition” (*Chepmel*).

CHARACTERISTICS.—In addition to the above it may be further remarked, that it is specially adapted to persons of spare habit, firm fibre, of lively, energetic, or irritable disposition, with tendency to constipation and piles. It is not, as has been stated, more suited to males than to females, except that the diseases to which it is homœopathic occur more frequently in the former than in the latter.

HEAD.—Confused, dizzy sensations, as if intoxicated; great sensitiveness to noise, conversation, bright light, strong odours, with illusions of fancy, frightful visions, inarticulate speech, etc.; gastric headache from overloading the stomach, or with ill humour; indecision and disinclination to work; headache from wine, coffee, or mental labour; vertigo from too free living or overtasking the brain; vertigo with disturbances in the digestive organs, nausea and vomiting.

EYES, FACE, ETC.—Weakness or soreness of the eyes, with

indigestion from straining the eyes, the prolonged use of artificial light, or the abuse of stimulants ; catarrhal ophthalmia ; painless ecchymosis ; motes before the eyes. Pale, yellow, or earthy complexion ; redness, heat and swelling of the face. Stoppage of the nose, particularly on one side. Toothache, darting and tearing, commencing in a hollow tooth and extending to several at once ; neuralgic faceache ; swelling and bleeding of the gums, with a foetid odour from the mouth ; bitter taste.

SLEEP.—Drowsiness after a meal ; sleeplessness of drunkards ; nightmare ; starting on falling asleep.

MORAL GROUP.—Hypochondria ; melancholy, especially if associated with liver complaint.

RESPIRATORY GROUP.—Cough on moving after a meal ; dry cough ; constriction or spasm of the chest or larynx ; dyspnoea from flatulence ; congestion of the chest ; spasmodic asthma.

DIGESTIVE GROUP.—Dyspepsia ; loss of appetite, or hunger appeased by the smallest quantity of food ; nausea, vomiting, or bitter or sour eructations, early in the morning, or after food ; “ morning sickness ” ; water-brash ; heart-burn ; feeling of distension after a meal ; cramp-like pains in the stomach ; colic ; flatulent colic ; stitches or pains in the region of the liver ; hysteric spasm ; nephritic colic, from the passage of a calculus through the ureters ; hernia ; *constipation*, as if the bowels were constricted, or only partially relieved, with frequent urging, especially if associated with the free use of spirits, or inactive habits ; constipation from torpor of the peristaltic action ; alternate constipation and diarrhoea ; dysenteric or diarrhoetic stools of a mucous, watery, or bloody nature ; blind and bleeding piles ; itching or pricking in the rectum ; thread worms ; prolapsus of the anus.

GENTO-URINARY SYMPTOMS.—Partial or entire paralysis of the bladder ; ineffectual desire to urinate ; catarrh of the

bladder. Nocturnal emissions, with weakness and relaxation. As an *aphrodisiac* it is often prescribed with great advantage. Too early and scanty menses; false, spasmodic labour-pains; leucorrhœa; prolapsus of the womb.

TRUNK AND EXTREMITIES.—Numbness and paralysis of the limbs and side; paralysis of the left arm; rheumatic paralysis; paralysis of the hands of drunkards; spasm of the lower extremities from cold; neuralgic affections of the spinal marrow; drawing and shooting pains and stiffness; muscular pains.

37.—Opium (*Papaver Somniferum*, Poppy).

HISTORY, ETC.—This plant, and preparations from it, have been used for medical purposes from remote antiquity.

The name papaver is from *papa*, pap, because it was used with pap given to children, a practice fraught with peril to their delicate frames. “The word *opinia* is from the Greek *opas* (juice), the juice *par excellence*, just as flower of rosemary has been called *anthos*, and the cortex cinchonæ, *the bark*.”

Opium is derived from the poppy, of which there are two varieties, the white and the black, and the part used is the inspissated milky juice, which is obtained by incision from the unripe capsules of *papaver somniferum*. We obtain our supply chiefly from Turkey and Egypt. Indian opium is either consumed by its inhabitants or shipped to China, where, as opium smoking prevails, it finds a ready market. This vice, which originated in China, largely prevails amongst the lower classes, and the debased, of most Eastern nations. *Opium smoking*, when once the habit is formed, soon becomes an all-absorbing passion. “In all opium smokers,” says Dr. Waring, “who have been under my care, I have found a cachectic state of the body, a premature decay both of mind and body, derangement of most of the

functions; and in them, the slightest scratch often degenerates into a foul and ill-conditioned ulcer."

Opium is said to consist chiefly of morphia, narcotine, gum, resin, oily matter, etc. It has long been employed by old school practitioners as an anodyne, a sedative, an anti-spasmodic agent, and administered in very large doses. Its therapeutic range in that practice is very large, and its preparations very numerous. Although often used most prejudicially in the case of adults, we would strongly denounce its employment in the form of *paregoric*, as a means of quieting young children, in whom it cannot but produce most disastrous results. Numerous instances are on record in which *laudanum*, or compounds into which laudanum largely enters, has produced fatal results in children; and its employment would be wholly inexcusable now that the light of homœopathy shows us such remedies as *Acon.*, *Bell.*, *Cham.*, *Coff.*, etc., as safe and potent means of suppressing the cries and restlessness of little children, by correcting, and not merely masking, the diseased condition on which their cries depend.

PROMINENT USES.—Ailments following fright or other sudden violent emotions; lethargy; delirium tremens; apoplexy; constipation; lead-colic; ailments of old people, etc. *Opium* is often useful to arouse the deficient nervous energy, and render the system susceptible to the action of other remedies indicated. See also *Sulphur*.

SLEEP.—Stupifying, unrefreshing; snoring, with half-open eyes; drowsiness, sometimes with inability to sleep; stupor, with half-closed eyes.

HEAD.—Delirium; stupor, or complete loss of consciousness; frightful fancies; vertigo, as if things were turning round; delirium tremens; apoplexy; humming and ringing noises in the ears; bloated and dark colour of the face; distortion of the mouth; lock-jaw,

RESPIRATORY GROUP.—Stertorous, irregular, suffocative breathing; pulmonary congestion.

DIGESTIVE GROUP.—Painter's colic; constipation from torpor of the intestinal canal, with evacuation of small hard balls; constipation from want of exercise or the use of aperients; involuntary stools; retention or involuntary flow of urine.

TRUNK AND EXTREMITIES.—Convulsive movements of the limbs, beginning with rigidity of the whole body; painter's paralysis.

38.—Phosphorus.

COMPOSITION, PREPARATION, ETC.—Phosphorus, from *phos* (light), and *phoro* (I bear), is an elementary substance usually obtained by calcining bones; also from phosphate of lime, iron, etc. Phosphorus enters into the composition of various animal substances,—brain, bone, and urine, and also of some vegetables. In the mineral kingdom it occurs in the form of *phosphates*, which gives fertility to some soils. Phosphorus is insoluble in water; partially soluble in alcohol; and more soluble in ether. It is a soft, flexible, semi-transparent wax-like solid, and should be kept under water, as exposure to the air, or the slightest friction, renders it inflammable. For homœopathic use it is prepared in the form of tincture.

MEDICINAL PROPERTIES.—Phosphorus is an irritant poison, causing inflammation of the stomach and bowels, in large doses. It is stimulant and aphrodisiac in small doses. The fumes of phosphorus cause violent inflammation of the mucous membrane of the air-passages, nostrils, and eyes; and persons much exposed to its vapour in manufactories are liable to necrosis of the lower jaw.

PROMINENT USES.—Physical and nervous weakness, resulting from loss of animal fluids, typhus and other exhausting

fevers, sexual abuses, wasting diarrhoea, etc.; affections of the throat and chest, and in the early stage of tubercular disease.

MORAL GROUP.—Weeping; depression of spirits; melancholy; timidity.

SLEEP.—Restlessness; wakefulness; disturbed dreams.

FEVER GROUP.—Hectic fever, with heat and dryness of the skin in the evening and early-morning perspiration; typhoid fever, with muttering delirium, paralysis of the rectum or bladder, etc.

HEAD.—Vertigo; pulsation in the brain; rush of blood to the head; pain as if the head would burst; dull, stupifying headache; falling off of the hair.

EYES.—Amaurosis; *muscae volitantes*, or a grey mist intercepting the vision; inflammatory redness of the eyes; swelling and agglutination of the lids; dimness or shortness of sight; attacks of sudden blindness.

EARS, NOSE, ETC.—Humming and whizzing noises, with dryness, and sometimes oozing of mucus; deafness, especially after severe acute diseases; stuffing of the nose: bleeding of the nose; loss of smell; offensive odour from the nose; polypus of the nose; earthy complexion.

MOUTH AND THROAT.—Tearing pain in the jaws at night; toothache from trifling cold, with swelling in the face; inflamed, sore, or bleeding gums; inflammatory ulcers in the mouth; dryness and soreness of the throat, with stinging pain on swallowing; adhesive mucus in the throat in the morning.

RESPIRATORY GROUP.—Bronchial catarrh, with dry cough, or with much mucous or bloody expectoration; chronic bronchitis; tearing or racking cough; hæmorrhage from the lungs; *hoarseness*, sometimes loss of voice; cough, with stitches and pain in the chest and throat; soreness and constriction, with difficult breathing; rush of blood to the chest; palpitation of the heart; pneumonia; tubercular consumption.

DIGESTIVE ORGANS.—Bitter or sour taste, or loss of taste; impaired or excessive appetite; indigestion, with pressure after eating; vomiting; heartburn; colic; stitching pains in the liver; coldness or burning in the abdomen; loose evacuations, with paralysis of the intestinal canal, and great weakness, as in typhoid fever; chronic diarrhoea; hæmorrhage from the bowels.

GENITO-URINARY GROUP.—Involuntary emission of urine; profuse urine, with white flocculent sediment, or with greasy pellicles, or oily globules floating on the surface. Delayed, scanty, or watery menses; or the opposite state—profuse menses; leucorrhœa; inflammation, suppuration, or fistulous openings in the breast. Sexual weakness or impotence, with trembling, impaired digestion, premature old age, etc., especially from previous abuse; frequent emissions; impotence, in old, debilitated subjects.

TRUNK AND EXTREMITIES.—Contusive pain in the back; stiffness and swelling of the nape of the neck; pain in the arms and shoulder-blades; rheumatism in the extremities; arthritic pains; swelling and smarting pains in the feet; numbness of the fingers; chilblains, with a watery, foetid discharge.

BONES.—Diseases of bones, with nocturnal pains; caries of bones, from scrofula, or from the abuse of mercury.

39.—Phosphori Acidum (*Phosphoric Acid*).

PREPARATION, ETC.—This acid is inodorous, with a very characteristic taste, and is obtained by the mutual action of phosphorus and nitric acid in distilled water. It is prepared in the form of tincture, and should be preserved with great care.

PROMINENT SYMPTOMS.—Weakness from loss of animal fluids—blood, semen, etc.,—consequences of grief, excessive care, too rapid growth, onanism, etc.; nervous weakness,

with disposition to perspire; hypochondria; diarrhœa. In the pharmacopœia of the old school, it is considered tonic, refrigerant, and aphrodisiac.

SKIN.—Glandular ulcers; itching and ulcerative pimples; obstinate ulcers, with an offensive discharge; malignant scarlatina.

FEVER GROUP.—Typhoid fevers, especially abdominal, with great prostration; hot, dry skin, or profuse sweats; hectic fever, etc.

RESPIRATORY ORGANS.—Hoarseness; cough, with expectoration, sometimes with pain in the abdomen; chronic bronchitis, with bloody and purulent expectoration; typhoid pneumonia, or pneumonia of a torpid character; anxiety, oppression, and constrictive pain in the chest; palpitation of the heart.

SEXUAL GROUP.—Seminal emissions, especially when resulting from onanism; impotence; morbid excitability; voluptuous dreams; thin and acrid leucorrhœa.

BONES.—Scrofulous affections of the bones; curvature of the spine; scraping pain in the periosteum; nightly pains in the bones of the legs.

40.—Platina (*Platinum*).

NATURAL HISTORY.—This is an elementary substance, of the colour and lustre of silver, nearly as tenacious as iron, and exists in its native state in combination with many other metals, such as palladium, iron, gold, etc. After being first purified, it is prepared for use by trituration.

PROMINENT USES.—Almost exclusively in certain derangements in the sexual system of the female, in which it has been employed with the greatest success. Hysterical depression of spirits, with debility, etc.; profuse and premature menstruation; induration and prolapsus of the womb; aching

pain in the small of the back; obstinate constipation; nymphomania in the first stage, with sexual excitement, shyness and depression of spirits.

41.—Plumbum (*Lead*).

HISTORY, ETC.—Metallic lead, in its native form, occurs almost invariably in combination with other substances—sulphur, acids, etc. After being purified by oxidization and subsequent fusion, we make triturations of it.

PHYSIOLOGICAL EFFECTS.—"In small doses, the salts of lead act on the alimentary canal as astringents, checking secretion, and causing constipation. After absorption, the constitutional effects of lead are observed, the arteries become reduced in size and activity, the pulse becomes smaller, and frequently slower also; the temperature of the body is diminished, and sanguineous discharges, whether natural or artificial, are frequently checked, or even completely stopped. This constringing and sedative effect seems extended to the secreting and exhaling vessels; the discharges from the mucous membranes, the exhalations from the skin, and the urine, being diminished in quantity. Thus we observe dryness of the mouth and throat, greater solidity of the alvine secretions, diminution of the bronchial secretions, and of cutaneous exhalation. When the system becomes impregnated with the metal, it occasions a peculiar blue or leaden discoloration of the gums, mucous membrane of the mouth, and teeth. Salivation, and a bluish colour of the saliva, have also been observed occasionally. In very large doses, some of the salts of lead, the acetate for example, act as irritant and caustic poisons, giving rise to the usual symptoms indicative of gastro-enteritis" (*Pereira*).

PROMINENT USES.—*Paralytic affections*, the extensor muscles being chiefly implicated; general, epileptic, or cataleptic *convulsions*; *colic*, resembling that produced by poison of lead, with violent pains in the umbilical region and spasmodic retraction of the abdomen; colic relieved by pressure; *constipation*, from a too dry condition of the mucous membrane of the intestines, with hard, lumpy stools. *Cachexia* (an unhealthy habit of the body), indicated by pale colour of the skin; exhaustion; oedema or dropsy; sexual weakness; obstinate nocturnal bone pains, etc.

42.—*Pulsatilla* (*Wind-flower*).

HABITAT, ETC.—This perennial flower is indigenous to elevated places in the greater part of Europe, where the soil is dry and sandy, and the situation exposed. It is called “Wind-flower,” because generally found in an exposed situation. It blooms in the spring and autumn; but the spring period of blossoming is the appropriate time for gathering the plant, from which, the root not excepted, we make a tincture of a greenish-brown colour, having an acrid taste.

PROMINENT USES.—Similar to those of *Nux Vomica* in derangements of the nervous and digestive organs, but generally more suited to females and scrofulous persons, of gentle dispositions, easily excited to laughter or weeping, rather than persons of firm fibre, and decided temper. In diseases of the stomach and bowels, *Pulsatilla*, rather than *Nux Vomica*, is selected when there is a tendency to relaxation; also in derangements caused by greasy food, such as pork, rich pastry, etc. It operates upon the lymphatic system and venous blood-vessels; the mucous membranes; the eye; the skin; and immediately upon the uterine system. The pains of *Pulsatilla* are worse in the evening, with warmth and during rest, but abate in the open air, or during moderate exercise.

HEAD.—Vertigo, especially in the evening, when stooping, rising up, moving the eyes, or walking; gastric headache, especially after eating rich, heavy, and indigestible food; nervous or sick headaches, particularly in hysteric females, or from night watching; menstrual headaches.

EYES, EARS, ETC.—Profuse lachrymation, with stinging or burning pains from cold; inflammation of the lids; stye; ophthalmia, especially after measles. Inflammation of the ear; buzzing in the ear, or noises as of wind, rushing water,

singing, etc.; purulent discharge from the ears; deafness; cold in the head, with loss of smell.

SKIN.—Varicose veins and ulcers; embarrassed venous circulation generally from pregnancy; erysipelas, wandering from one part to another; wandering gout; chilblains with bluish-red swelling, and

MEASLES.—Massive doses of *Pulsatilla* produce an eruption on the skin similar to measles. Hence we use it as a curative agent in measles, especially after the inflammatory symptoms have been controlled by *Aconitum*; also for the after consequences of measles. *Pulsatilla* is also a *preventive* of measles, during the prevalence of this complaint.

MORAL GROUP.—Lowness of spirits; hysteria or melancholy, connected with milk or menstrual suppression; anxiety, sadness, and disposition to weep.

RESPIRATORY GROUP.—Catarrhal affections of the air passages; catarrh with loss of taste and smell; cough when lying down; cough with expectoration of yellow, green, or bloody mucus; cough with inclination to vomit; excessive accumulations of mucus; congestion of blood to the chest or heart, from rheumatism or suppression of the menses.

DIGESTIVE GROUP.—*Toothache*, aggravated by warmth or eating, but relieved by cool air; darting toothache, as if the nerves were first stretched and then relaxed; foul taste or smell in the mouth; loss of appetite or thirst; viscid mucus on the tongue, the food tasting bitter; derangement caused by rich, fat food; vomiting of mucus or bile; water-brash; flatulence; colic; painful sensitiveness of the abdomen; diarrhoeic discharges of yellowish-white mucus, with or without admixture of blood; nocturnal diarrhoea preceded by rumbling or cutting pains.

GENITO-URINARY GROUP.—Catarrh of the bladder; difficult emission, or incontinence of urine; discharge of watery urine; swollen testicle, from a suppressed discharge.

Perhaps the most remarkable property of this remedy is its action upon the *female sexual system*, in irregularity of the menses, and various sufferings consequent thereon; delayed, suppressed, pale, or watery menses; menstrual colic; leucorrhœa; false, delayed, or deficient labour-pains (in alternation with *Secale*); excessive after-pains, suppression of the lochia, and a painful tension of the breasts, with an abnormal secretion of milk.

43.—*Rhus Toxicodendron* (*Poison Oak*).

NATURAL HISTORY, ETC.—This shrub is indigenous to North America, Japan, etc., and abounds on the borders of rivers, or in marshy districts, growing very tall in a congenial soil. The leaves are gathered in May, during the night-season, so as not to be exposed to the rays of the sun, which are said to render them innocuous. The juice is expressed, and treated like that of other fresh plants.

PROMINENT USES.—Rheumatism, and its consequences, characterized by *the pains being increased when at rest*; partial or complete paralysis; vesicular erysipelas; semi-lateral complaints; consequences of getting wet when perspiring; chronic diarrhœa; typhoid fevers; straining of tendons; eruptions (moist) on the scalp, etc.

HEAD.—Sense of fulness in the head, stupifying headache, as in acute fevers; vertigo and hemicrania; tingling eruption on the scalp, forehead, etc.; paralysis.

MENTAL GROUP.—Anxiety and fear about the future; peevish mood; incapacity for mental labour; a feeling of fright, oppression, and even delirium.

EYES, EARS, FACE, ETC.—Inflammatory swelling of the lids, with itching; rheumatic ophthalmia; confusion of sight. Pain and swelling of the ear; swelling and hardness of the parotid glands; erysipelas of the face, with stinging or burning; chronic eruptions; tetter; swelling of the face.

SKIN.—Herpetic eruptions; excessive itching; tinea capitis, with itching and inflammatory redness of the scalp, and foetid discharge under the scabs; nettle-rash; pustules; *purpura hæmorrhagica*; chilblains; warts on the hands.

FEVER GROUP.—Chills, especially in the back; low, typhoid fever, with the tongue coated thick brown, and red at the tip, and small quick pulse; scarlatina, measles, smallpox, with a malignant tendency; abdominal typhus; typhoid pneumonia.

DIGESTIVE GROUP.—Indigestion, with poor or capricious appetite; painful distension with colic after a meal; diarrhoea and tenesmus, with slimy or bloody evacuations. Paralysis of the neck of the bladder, especially in hysteric females, or in strumous or aged persons; nocturnal enuresis, and when a similar weakness extends to the bowels.

TRUNK AND EXTREMITIES.—Rheumatism and arthritic affections; paralysis of the arms, legs, and feet, and a feeling of numbness in the feet; sprains and affections of the ligamentous tissues. "The disease in which I have most frequently made use of *Rhus* is rheumatism, characterized by the following symptoms:—rigidity; paralytic weakness of the joints, with stinging pain along the tendons and muscles; swelling and redness on or near the joints. Rheumatism of the hip-joints and wrists seems to be most effectually controlled by its action. *The greatest rigidity and pain is experienced on first moving the joints after rest, and on waking up in the morning. After the joints are moved, for a while the pains are lessened*" (*Neidhard*).

44.—*Sambucus Nigra* (*The Elder*).

NATURAL HISTORY, ETC.—The well-known elder tree so common to the hedges and woods near villages of our own country, as also to a great part of Europe, grows often to the height of from twelve to fifteen feet, rises with a woody

trunk filled with a pith or white medullary substance, and covered externally with an uneven, ash-coloured bark. The inner bark is the part generally used for medicine, but some use the united juices of the leaves and flowers.

PROMINENT USES.—It has a limited range, being nearly restricted to affections of the *respiratory organs* of a violent and dangerous nature, especially the following:—*Asthma Millari*; *Croup*, with stertorous breathing, and the head drawn back; deep, hollow, croup-like cough; whooping-cough; cough, with profuse saltish expectoration, and aching or stitching pains in the chest; difficult breathing; profuse night-sweats; emaciation; dropsical swelling of the feet; intermittent fever, with exhausting sweats. It has been used as a palliative in the debilitating night-sweats of consumptive patients. Also in some varieties of rheumatism, with drawing pains in the limbs and loins, diminished by movement and increased by rest.

45.—*Sepia* (*Sepiæ succus*).

NATURAL HISTORY, ETC.—The *sepia* are molluscæ of the seas. They are without shells, and in the abdominal cavity is a sac containing a dark-brown juicy substance, with which they darken the water to elude an enemy or capture prey. It is from this liquid, after being dried, that the medicinal preparation is made; and though in its crude state is apparently inert, it develops powerful physiological properties, after undergoing the process of trituration.

PROMINENT USES.—Disturbance of the circulation in females, with deficient natural temperature. Sensitiveness to the open air; coldness of the hands and feet, etc., especially if associated with the uterine system; chronic eruptions and morbid affections traceable to interruptions of the function of circulation. *Sepia* is more particularly suited to persons of delicate organization, with fine sensitive

skin, nervous and excitable dispositions, palpitation, etc. The pains are relieved by warmth. It is rarely adapted to acute diseases.

SKIN.—Dry or humid eruption, with itching and burning; *ringworm*; itching, and itching pimples in the joints; warts; painful corns.

HEAD.—Hemicrania, with vomiting; rush of blood to the head; hysteric sick-headache; headache as if the eyes would fall out, or the head burst; itching eruption or scabs on the scalp; falling-off of the hair.

SEXUAL GROUP.—Organic or functional disturbances of the generative organs. *Menstrual irregularities*; too early, scanty, or brief menstrual discharge; spasmodic or griping pain before the menses, often with nausea or vomiting, flushed face, headache, palpitation, languor, etc. Suppression or retention at the age of puberty. *Ailments during pregnancy*; toothache; vomiting; tendency to miscarriage after the fourth or fifth month, etc. *Affections incidental to the critical age*. Falling of the womb, and bearing down pain; acrid leucorrhœa, with soreness or itching sensations in the parts; yellowish mucus, or watery discharge; flushes of heat; tettery eruptions, etc. Sexual excitement; hysteria, etc.

46.—*Silicea* (*Silex, Oxide of Silicium*).

COMPOSITION, ETC.—This mineral exists pure in native combination in rock crystals, and nearly pure in flint; also in quartz, sandstone, etc. It is a dry, gritty, tasteless white powder, nearly wholly insoluble, and, like *Sepia*, apparently inert in the form in which it exists in nature, but capable of exercising great power after its latent properties have been developed by trituration.

PROMINENT USES.—Scrofulous ulcers; glandular and lymphatic swellings; affections of the bones; scabbed head

housemaid's knee; discharge from the ear; falling-off of the hair; chronic affections from large doses of mercury. *Silicea* is remarkable for its power over the absorbent and exhalent vessels, especially those of the joints, sheaths of tendons, etc. It promotes the kindly suppuration of abscesses of all kinds, with good or bad pus.

Silicea and *Pulsatilla* have many features in common, and the more closely the effects of one are compared with those of the other, the more complete does the resemblance appear. Teste regards *Silicea* as the "*Pulsatilla* of chronic diseases." *Silicea* differs, however, from *Pulsatilla*, in its symptoms being more constant, deep-seated and protracted. But in their general action upon the vascular system, the action of these drugs is very similar.

SKIN.—Eruptions from diseased conditions of the lymphatic system; painful tenderness or itching of the skin; eruption like chicken-pox, with violent itching; eruptions having an ulcerative tendency; scrofulous ulcers, torpid, spongy, readily bleeding, or secreting an unhealthy pus, especially in the case of cachectic patients; glandular and lymphatic swellings, wherever situated; ganglia; corns; whitlows; smell of the feet; fistulous ulcers, having a foetid yellowish or ichorous discharge, especially when complicated with diseases of the bone.

BONES.—Softening and caries of the bones, and affections consequent on large doses of mercury; swelling and curvature of bones; rachitis (rickets).

RESPIRATORY GROUP.—Phthisis pulmonalis; hectic, with cough and purulent or bloody expectoration; shortness of breath.

FEMALE BREAST.—Suppurating abscess of the mammæ of nursing women; inflammatory condition of the nipple; carcinoma of the breast.

SEXUAL.—Milky leucorrhœa; miscarriage; sterility.

47.—Spongia Marina Tosta (*Burnt Sponge*).

PREPARATION.—The medicinal product yielded by sponge is obtainable by roasting the best Turkey sponge in a coffee roaster, cleansed from all sand and calcareous matter by repeated washings, slow filtering, and pressing. The roasting has to be done very carefully, as it is often carried to such an excess as to resemble a black coal, depriving it of its therapeutic virtues, by destroying the iodine constituents. Iodine is not, however, its only medicinal ingredient, for then *Iodine* and *Spongia* might be used indiscriminately. Carbonate and phosphate of lime, alumina, silica, bromine, and organic substances, are found in *Spongia officinalis*; these elements are combined in definite proportions, not by the chemists' compounding, which must ever be of a most conjectural nature, but by a natural organizing principle, blending organic and inorganic elements with a unitary whole.

PROMINENT USES.—The chief value of this agent seems to depend upon its specific action upon the mucous surfaces and secretory vessels of the larynx and air-passages.

LARYNX AND CHEST.—Dryness of the larynx, with *short barking cough*, frothy or tenacious expectoration, and difficult breathing, as if the larynx and trachea were narrowed; feeble voice, *hoarseness* or complete loss of voice; wheezing cough, worse at night, excited by a tickling or burning sensation; pain in the throat and chest on coughing; stitching pains in both sides of the chest, resembling pleurisy; *croup*, especially in the second stage; *asthma*, with deep, slow, hurried, or panting breathing; laryngeal phthisis; pleurisy, pericarditis, etc.

GOITRE.—As a specific for goitre, *Spongia* probably ranks before *Iodium*, more particularly in goitre attended with pressure and tingling in the swelling, or with a sensation of constriction.

48.—*Staphysagria* (*Palmated Larkspur*).

HABITAT, ETC.—Stavesacre is a biennial plant indigenous to the south of Europe. The seeds are used for medicinal purposes, from which, after being bruised, the tincture is derived. It is called *louse wort*, because the bruised seeds have been used to destroy lice.

PROMINENT USES.—Strumous, arthritic, and mercurial ailments; hysteric and hypochondriac affections; odontalgia.

SKIN.—Itch-like eruptions, with burning, pricking sensations; herpetic eruptions; sea scurvy; arthritic and rheumatic affections, attended with chilliness.

MENTAL GROUP.—Hypochondria of long standing, with anxiety concerning the health, weak memory, imaginary fears, excessive sensitiveness, etc.

HEAD, ETC.—Nervous headaches; vertigo, with continual nausea; constrictive, pressive, or boring headache in the forehead, and acute stitches in the temples; moist and obstinate eruption on the hairy scalp; falling off of the hair; amaurotic condition of the eye; ophthalmia; inflammation of the margin of the lids.

DIGESTIVE GROUP.—*Blackness and caries of the teeth*; gnawing toothache, with swelling of the cheek; severe pain in hollow teeth, especially when eating or when drinking anything cold, or in the open air; tearing pain in the gums or bones of the face; loose teeth, with readily-bleeding gums; nausea in the morning: sickness of pregnant females; tension and pressure in the abdomen as from over-repletion; incarcerated flatulence; slight diarrhoea alternating with constipation.

GENITO-URINARY GROUP.—Frequent emission of watery urine; frequent desire to urinate, passing only a small quantity; smarting and burning of the urethra when urinating. Irregular appearance of the menses at long

intervals, with severe pains during the flow. Discharge of prostatic fluid; drawing sensation in the spermatic cord; aching pain in the testes from walking or friction; impotence.

49.—Stramonium (*Thorn Apple*).

HABITAT, ETC.—This is an annual plant, growing in various parts of Europe, Asia, and North America, in rich soils or on manure heaps. Every part of the plant, but especially the seed, yields the medicinal product. A yellowish tincture is made of the seeds, or a dark green one of the fresh plant before it flowers.

PROMINENT USES.—Dementia, especially of drunkards; delirium; illusions of the fancy; *mania ferox*; *mania saltatoria*; monomania religiosa; lascivious mania; typhus fever with delirium; illusions of sight and anxiety; hydrophobic convulsions; hysteric spasms and convulsions; puerperal mania or convulsions.

RESPIRATORY GROUP.—*Asthma*, with spasmodic constriction across the chest, and small quantities of viscid mucus. It has been recommended to *smoke* Stramonium like tobacco.

Stramonium is employed for many symptoms so closely resembling those for which *Belladonna* is given, that it is not always easy to define the indications which distinguish these remedies.

50.—Sulphur (*Flores Sulphuris*).

HISTORY, ETC.—Sulphur is an elementary body, and is either a volcanic produce, being found in considerable quantities, in a native form, near volcanoes, in amorphous masses, or in the form of crystals, or it occurs in beds in many parts of the world. It is also a constituent element of various organic substances, as albumen in eggs, etc., in some plants, but most abundantly in minerals and in mineral waters.

It is frequently found in combination with metals, as in the common ores called pyrites, the sulphurets of iron, lead, copper, etc., whence it is obtained by roasting. It is of a pale-yellow colour, insipid and inodorous, insoluble in water, slightly soluble in alcohol, but more freely soluble in ether. In homœopathic practice, we use either a trituration or tincture.

MEDICINAL ACTION.—In allopathic doses (gr. x.—gr. xxx.) *Sulphur* is diaphoretic and alterative, and in larger doses laxative. It operates specifically upon the mucous membrane of the intestine. It is absorbed into the system, and may be detected in the various fluids of the body; a large portion passes off by the bowels, part is oxidized and converted into sulphuric acid, which is eliminated by the kidneys; and another portion passes off by the skin in the form of sulphuretted hydrogen. In the last way it proves useful in cutaneous diseases. Under the continued use of small doses, it stimulates the various secretions, particularly of the skin and mucous membranes (*Waring*). Administered in the above fashion, sulphur is attended with many disagreeable circumstances, and is less efficient as a curative agent, small doses being better appropriated by the system, and producing more lasting results.

PROMINENT USES.—*Sulphur* operates specifically upon the *skin* and *mucous membrane*, and also, but in a less marked degree, upon all parts of the animal economy. It is a remedy of prime importance in maladies originating in any constitutional cachexia, whether from scrofula, bad air, bad food, or the abuse of mineral drugs, such as mercury. In all deep-seated chronic maladies it is of essential service, either as the chief remedy or as an adjunct to others. Hahnemann placed *Sulphur* in the foremost rank of his *antipsorics*.

Sulphur is often useful where other medicines, although clearly indicated, do not effect the necessary improvement;

in such cases, a dose or two of *Sulphur* will often arouse the dormant nervous energies, and render the system susceptible to the action of the medicines indicated.

SKIN.—Here *Sulphur* occupies a very high, if not the highest, rank. Herpes and eruptions of various kinds, burning and itching, or dry and scaly eruptions; *itch*; intolerable itching relieved by scratching; ulcers; chilblains; boils, especially on the nates; chronic and oft-recurring erysipelas; glandular swellings; partial perspirations, chiefly on the head; scald-head; excoriations of infants.

FEVER.—Intermittent fever of patients troubled with various skin affections; hectic fever, with sour or foetid night sweats.

EYES, EARS, ETC.—Purulent discharge from the eyes; strumous ophthalmia with thickening of the mucons membrane of the lids; inflammatory swelling or ulceration of the eye-lids. Deafness with noises, itching, or dampness of the ear. Scrofulous swelling and ulceration or inflammation of the nose: depravation of smell; coryza.

RESPIRATORY GROUP.—Chronic catarrh; epidemic influenza; chronic cough, with expectoration of thick phlegm or purulent mucus; chronic hooping-cough; scrofulous consumption; chronic pneumonia; chronic hæmoptysis; rush of blood to the chest; palpitation and abnormal irritability of the heart.

DIGESTIVE GROUP.—Chronic indigestion, with a sour, bitter, and insipid taste in the mouth; heartburn, nausea, eructations, etc.; flatulence; chronic constipation; insufficient, knotty, or hard evacuations; alternate diarrhœa and constipation; chronic diarrhœa; piles; soreness and itching of the anus; worm colic. Liver complaints.

GENITO-URINARY GROUP.—Incontinence of urine; frequent urging to urinate; irritable bladder; wetting the bed, especially children troubled with worms. Chronic slimy,

burning, or painful leucorrhœa; itching and soreness of the parts; irregular menstruation; prolapsus of the uterus; miscarriage; weakness of the sexual organs, as a symptom of scrofula.

CHARACTERISTIC FEATURES.—Sulphur is pre-eminently indicated in diseases affecting patients previously troubled with eruptions, ulcers, or sores, or in diseases traceable to the scrofulous element in the constitution. The pains are worse at night, from the heat of the bed, and in changeable weather, particularly in cold and damp, but are mitigated by warmth of the room.

51.—*Veratrum Album* (*White Hellebore*).

HABITAT, ETC.—This plant is indigenous to the mountainous districts of Europe, and is found in great abundance on the Alps of Switzerland. We prepare the strong tincture from the root, collected in July, dried and pulverized.

PROMINENT USES.—In poisonous doses, its action is rapidly extended to the organic system of nerves, inducing vomiting, diarrhœa, reduction of the animal temperature, sensation of great discomfort and anguish, lowers the action of the heart, and impedes the breathing. Its influence being directly exerted upon the brain and spinal nerves, spasms, convulsions, paralysis, delirium, etc., are rapidly produced. Hence its beneficial action, in homœopathic doses, in *Asiatic cholera*, in which disease it is one of our most reliable remedies; diarrhœa and painful gripings; *convulsive stage of whooping-cough*; cramps in the bowels or limbs; paralytic pains in the extremities; vomiting of food and drink; black-vomit; extreme weakness; faintness; convulsions, etc.

FEVERS.—Remittent fever with a tendency to the typhoid variety; cold sweat; coldness of the body with internal heat; great prostration with nearly imperceptible pulse.

HEAD.—Nervous headache, with nausea, vomiting, and

paleness of the face; vertigo, with fainting, prostration, obscuration of vision; headache when stooping or walking; cold perspiration on the forehead; acute hydrocephalus, with vomiting on raising the head.

MENTAL GROUP.—Different forms of mania, especially amorous or religious; brief attacks of delirium and mania from paroxysms of pain; defective memory; confusion of intellect; consequences of fright; low, desponding spirits.

FACE.—Hippocratic countenance, with pointed, icy-cold nose, sunken cheeks, blue lips, etc. Toothache with nausea, vomiting, coldness, and great weakness; cold tongue.

EYES, ETC.—Contraction or excessive dilatation of the pupils; paralytic condition of the lids; black spots and sparks; double vision; nocturnal blindness; dryness, soreness, or ulceration of the nose.

RESPIRATORY GROUP.—Suffocative paroxysms in the throat; tenacious mucus, impeding the breathing; suffocating cough; *hooping-cough*, with blue face, often causing an involuntary escape of urine; children do not recover their wonted cheerfulness and brightness between the paroxysms, are unable to hold their heads erect, are averse to conversation, and complain of chilliness, symptoms which are not present when *Drosera* is indicated. Spasmodic asthma. Palpitation of the heart, with great anguish and oppression in that region.,

DIGESTIVE GROUP.—Extreme nausea and vomiting, excited by movement, or by swallowing fluids, with excessive thirst; black vomit; cholera infantum; diarrhoea from cold drinks; *Asiatic cholera*, with symptoms of paralysis and asphyxia, insatiable thirst for cold water, a shrivelled appearance of the skin, pinched face, cold tongue, etc. Violent cramp, with severe cutting pain in the stomach; greenish, blackish, watery, or involuntary diarrhoea; nocturnal diarrhoea with *great prostration*.

URINE.—Acrid, burning urine; desire to pass water even when the bladder is empty; involuntary passage of urine; urine diminished.

TRUNK AND EXTREMITIES.—Coldness of the whole body; general cold sweat; epilepsy; general weakness and faintness; paralytic, bruised pain in the back and extremities; cramps in the calves of the legs; tetanic spasm with flexure of the fingers and toes; trembling, debility, coldness and numbness of the hands and feet.

Antidotes.

In the event of an over-dose of any of the above medicines having been administered, two drops of the *Tincture of Camphor* (page 514), or a strong infusion of coffee, will arrest any unpleasant consequences. Antidotes against poisonous doses are suggested under some of those remedies the action of which is most dangerous. For the general treatment of cases of poisoning, the chapter on "Toxicology" may be consulted in the larger edition of this work.

CHAPTER II.

CONCENTRATED REMEDIES FOR EXTERNAL USE.

1.—*Aconitum Napellus*.

(For its uses as an internal remedy, see page 489.)

PROMINENT USES.—Neuralgia, toothache, local inflammatory affections, etc., in which *Aconitum* is clearly indicated, are often immediately benefited by the external application of this remedy after the unsuccessful internal use of the attenuated tincture. See under "Neuralgia," page 477.

FORMULA.—Twelve drops of the strong tincture from the root to about four table-spoonsful of water (warm or cold as may be most agreeable), applied by means of a linen rag saturated with the lotion.

2.—Tincture of *Arnica Montana*.

(For its internal administration, see page 496.)

PROMINENT USES.—*Bruises, concussions, incisions, lacerations, fractures, burns*, etc. The discoloration, stiffness, swelling, and soreness consequent on bruises by blows or falls, may be almost entirely prevented by the prompt use of this remedy. Its rapid curative action, however, depends very much upon the promptitude with which it is applied after the injury.

CUTS.—In cuts and when the *flesh is much torn*, the lotion should be only half as strong as for bruises, and applied in the same way. (See *Calendula Officinalis*.)

SORE NIPPLES.—Arnica lotion (five drops of the tincture to a wine-glassful of water) is an excellent remedy. The nipple should be bathed several times a day after nursing, taking care to moisten it with saliva before giving it to the infant.

FATIGUE AND OVER-EXERTION.—If from walking the feet are swollen or blistered, a warm-water foot-bath may be used, in which a teaspoonful of the strong tincture is mixed, the relief afforded being often rapid and lasting. In muscular fatigue from long-continued, or short, but severe, exertion, the affected parts should be bathed with a lotion made in the proportion of one teaspoonful of *Arnica* to six table-spoonful of water. *Arnicated Baths* are also very grateful, and afford prompt relief. (See page 421.)

Arnica is also an invaluable application to *corns, chilblains, chapped hands or lips, rheumatism, after the extraction of teeth*, etc.

FORMULA.—A *lotion* may be made by mixing twenty drops of the strong tincture in about half a teacupful of water; if the skin is broken the lotion should be somewhat weaker. The bruised parts may be bathed with this lotion, or it may be applied by linen cloths saturated with it, and covered with oiled-silk, to prevent evaporation. Generally, the administration of *Arnica* as prepared for internal use, will hasten the cure.

It may increase the utility of this article by stating that in addition to the *tincture*, there are various useful forms in which *Arnica* is prepared:—*Arnica Cerate* and *Arnicated Balls*, for chapped hands or lips, and for chilblains; *Arnica Liniment* and *Opodeldoc*, for rubbing the parts in sprains, rheumatism, etc. (see *Rhus Toxicodendron*); and *Arnica Court Plaster*, for cuts, corns, etc.

3.—*Calendula Officinalis* (*Marigold*).

HISTORY, ETC.—The marigold is a native of France, but is now found in cultivated grounds in most parts of Europe. The leaves and flowers are the parts used in medicine.

CALENDULA AND ARNICA.—*Calendula* is much superior to *Arnica* as an application to recent injuries in which the parts

are *cut* or *lacerated* rather than *bruised*, with or without much hæmorrhage. It deserves preference in all cases of injury in constitutions liable to *erysipelas*. *Arnica* is more adapted to contusions, bruises, and sprains.

PROMINENT USES.—*Wounds* penetrating the joints; *cuts*, whether accidental or inflicted in operations, and injuries generally in which *the flesh is much torn*, and which do not heal without the formation of matter. In such cases it is preferable to *Arnica*, and often heals wounds without leaving any very obvious scar, and the formation of matter, if not altogether obviated, is greatly modified. It relieves the severest pains attending various accidents. It is an invaluable remedy in ulcers of the lower extremities, such as often occur in broken-down constitutions, especially in the decline of life.

FORMULA.—A lotion may be made by mixing twenty drops of the tincture in about a teacupful of water. If the bleeding is considerable, the lotion may be made much stronger.

4.—Tincture of *Rhus Toxicodendron*.

(For its internal uses, see page 564-5.)

PROMINENT USES.—This is an extremely efficacious remedy as an external application in *sprains*, *injuries to ligaments, tendons, joints*, and the membranes investing the joints. It is especially indicated in sprains in which the rigidity and pain are most severely felt on first moving the affected parts after rest. The pains are also worse at night while at rest. For injuries of this character, it will generally be found more suitable than *Arnica*. In *old chilblains*, with smarting, itching, and irritation of the skin, it may be applied with great success. *Warts* are often successfully treated by touching them once or twice a day for a week or two with the strong tincture.

FORMULA.—A lotion may be made by adding twenty drops of the strong tincture to a tumbler of pure water.

Genuine Medicines.

To obtain a beneficial action from the remedies prescribed in this Manual, it is best to obtain them from an educated, trustworthy person, who is exclusively occupied as a Homœopathic chemist. As a safeguard, clergymen, missionaries, emigrants, and persons remote from Homœopathic Institutions, should consult a medical man before purchasing, who will be able to direct them where to procure reliable medicines, and to suggest hints as to the remedies, and the forms of them, most likely to meet special requirements.

HARD WORDS;

THEIR EXPLANATION AND PRONUNCIATION, FOR THE NON-PROFESSIONAL READER.

ABDOMEN (*ab-do'-men*). The largest cavity in the body, is separated from the chest by the thin flat muscle, the diaphragm, and extends down to the pelvis; it is not surrounded by arches of bone, like the chest, but its walls are chiefly muscular, and are capable of exercising great pressure on the included organs and their contents, as in the expulsion of fæces, urine, and in parturition.

ABNOR'MAL. Contrary to the natural condition.

ABSCESS (*ab'-scess*). A collection of pus or purulent matter, in any part of the body, contained within a cyst or sac, and resulting from diseased action.

ADYNAMIA (*à-de-na'-me-à*). Reduction of the vital powers by disease, as in typhoid fever. The pulse sinks, the heart acts feebly, and there is tendency to collapse; the features become pinched, shrunken, and ghastly, and the skin cold and clammy.

AGGLUTINATION (*ag-glu-tin-a'-shun*). The adhesion of two surfaces, as the eye-lids, by a tenacious substance, as pus.

ALOPECIA (*a-lo-pe'-se-a*). Loss of hair. In modern medical language it is applied to any kind of baldness; but, strictly, it is a falling off of the hair from the beard and eyebrows, as well as from the scalp.

ALTERNATION (*al-tern-a'-shun*). By turns. It implies that the doses of two medicines are to be given at intervals, in succession, so that each is followed by the one that it succeeds. See pages 49-50.

AMAUROSIS (*am-or-o'-sis*). Complete or partial loss of vision, without any visible defect in the eye, except an immovable pupil, and depending on some change in the retina, optic nerve, or brain. (See "Amaurosis" in the body of the work.)

AMENORRHŒA (*a-men-ò-re'-à*). Absence, retention, or suppression of the menstrual discharge. The term is also used to describe scantiness of the menses.

AMNION. The amnion is a closed sac, thin, firm, and nearly transparent, enclosing the embryo. This sac contains a considerable quantity of fluid—the *liquor amnii*, which see.

ANASARCA (*an-a-sar'-ka*). An accumulation of watery fluid under the skin in the areolar tissue, more or less generally throughout the body. (See also "Dropsy" and "Œdema.")

ANCHYLOSIS (*ank-e-lo'-sis*). A fusion or union of the ends of bones, consequent on injury or disease of a joint, rendering the joint permanently immovable.

ANÆMIA (*a-ne'-me-a*). Deficiency or poverty of blood. The blood contains too few red corpuscles, so that on analysis it is found to contain only 80 or 60, or even in severe cases 30 per 1000, instead of, as in health, 120 or 130. (See pages 381-2.) *Death by anæmia* occurs in this wise: a person loses blood from a wound, or by hæmorrhage in disease, to such an extent that *fainting* takes place; and if the discharge is not arrested, the state of faint continues, and the heart's action finally ceases, because its natural stimulus, the blood, does not enter it in sufficient quantity. The symptoms indicating this mode of dying are, paleness of the lips and countenance, cold sweats, dimness of sight, dilated pupils, a weak, slow, irregular pulse, insensibility, and in sudden and violent hæmorrhage, as in "flooding," nausea, or even vomiting, and convulsions, before death. The recognition of these symptoms is sometimes very important, as fatal hæmorrhage may be taking place into one of the internal cavities of the body of which we may have no other evidence.

ANÆSTHESIA (*an-es-the'-zhe-d*). Total or partial deprivation of the sense of feeling. The chief anæsthetic agent now in use for producing insensibility to pain is CHLOROFORM, which was discovered in 1831; but its anæsthetic properties were only made known in 1847, by Professor Simpson. By the mere breathing of this subtle vapour for a brief interval, the patient is lulled into a calm sleep, and complete insensibility produced, allowing the surgeon deliberately to perform any, even the most severe, operation. Anæsthesia is a brilliant discovery, saving an untold amount of bodily suffering, a greater weight, probably, of mental agony in dreaded prospect of the operation, and accelerating recovery by mitigating the force of the shock of an operation to the nervous system. If proper precautions are taken, and due care observed, untoward consequences are extremely rare. We have been present at many hundred operations in which chloroform has been administered without ever witnessing any injurious result from its use. So potent a drug, however, should never be administered except under the personal supervision of a medical man. *Local anæsthesia* may be produced by intense cold, such as applying pounded ice to the skin. At present, however, Dr. Richardson's narcotic spray as a means of producing local insensibility to pain is being used, and, in many cases, answers well. The narcotic spray blanches the skin in one or two minutes, and permits more than merely superficial incisions to be painlessly made. It is particularly useful in opening abscesses and carbuncles, removal of tumours, etc. This method of producing anæsthesia is only in its infancy, and it is impossible at present to predicate the uses to which it may be applied; this much, however, is certain, it renders the use of chloroform unnecessary, and consequently improper, for minor surgical operations, during the performance of which the greatest number of accidents from chloroform have occurred.

ANOREXIA (*an-o-rec'-e-a*). Loss of appetite irrespective of dislike to food. It is generally a symptom of disordered digestion, requiring the measures recommended under "Indigestion."

APHONIA (*af-o'-ne-a*). Loss of voice. Often a symptom of acute or chronic affections of the throat, resulting from a cold. The chief remedies are, *Hepar Sulph.*, *Carbo Veg.*, *Puls.*, and *Phos.*

APHRODISIACS (*af-ro-di'-e-aks*). Medicines which increase the functional activity of the generative organs.

APNŒA (*ap'-ne-a*). Privation of air; suffocation. It is that state of suspended animation which is induced by the stoppage of the act of inspiration by mechanical or chemical agents, as hanging, drowning, the inhalation of irrespirable gases, etc.

ASPHYXIA (as-fiz'-s-a). Suspended animation. It has the same meaning as *opium*, but is less expressive of the mode of death indicated.

AREOLAR TISSUE (a-re-a-la). This is composed of a network of delicate fibres and bands which interlace each other in various directions, forming spaces or areolæ, which communicate freely. In the members of this tissue, fat is widely distributed through the body. Fat may be said to consist of a multitude of cells, filled with oily matter of the ordinary temperature of the body, and united together by bands of this tissue. This tissue serves as a protecting medium to subjacent parts; being a *fluid* and not a *solid*, it obeys the laws of fluids, diffusing pressure and breaking the force of shocks by distributing it over a wider surface. It fills up interstices which would otherwise exist in various parts of the body, at once separating and uniting the various structures, while at the same time it facilitates motion.

ARTHRITIC (ar-thrit'-ik). Gouty affections of the joints.

ARTHRITIS (ar-thrit'-tis). Rheumatic or gouty inflammation of a joint.

ARTICULAR (ar-tic'-u-lar). Relating to joints, as *articular rheumatism*.

ARTICULATION (ar-tic-u-lā'-shun). The mechanism of joints.

ASCITES (as-sit'-ies). Dropsy of the abdomen, or more strictly of the *peritoneum*. The abdomen becomes equally distended with fluid, fluctuates, and this condition is generally preceded by impaired health, œdema of the legs, etc.

ATROPHY (at-ro-fi). The wasting of an organ or body. It results from disease, a defective supply of blood, or of blood lacking materials necessary for healthy growth, or of deficient vitality from disease, exhaustion, starvation, etc. It is the reverse of *hypertrophy*, which see.

BRONCHIAL TUBER. The divisions and subdivisions of the windpipe, which ramify and convey air to every part of the lungs.

CACHEXIA (ka-kex'-s-a). A bad condition or habit of body.

CADAVEROUS (ka-dar'-er-us). Having the appearance of a corpse; pale, wan.

CAPILLARIES (from *capillus*, a hair). Minute, hair-like blood-vessels, the minute ramifications of arteries terminating on the surface or in the internal cavities of the body.

CAPILLARY. Hair-like.

CATALEPSY (kat'-a-lep-si). Suspended voluntary motion, sensibility, and, for the most part, mental power, so that the patient remains speechless, motionless, and senseless, while the action of the heart and lungs continues.

CHOREA (kō-re-a). St. Vitus's dance. A disease characterized by convulsive movements of the limbs, occasioning ludicrous and involuntary gestulations, there being only incomplete subserviency of the muscles of this class to the will. It has been wittily termed *mannity of the muscles*. The leading causes are, fright, irritation from dentition or worms, onanism, deranged uterine functions, hysteria, and descent from nervous, hysterical women. This brief enumeration of causes may suggest the appropriate treatment.

CICATRIX (si-ku'-triz). A scar or seam remaining after a wound or ulcer.

CICATRIZATION (sik-a-tre-zā'-shun). This is the natural process of healing a wound or ulcer, and consists in the absorption of inflammatory products, the effusion of fresh fibrine, from which material fibrous tissue, covered with cuticle, closes over the sore, leaving a scar, which is the new skin formed over the surface. This new, is much inferior to the old, skin of the body, being less nourished by blood vessels, less sensitive, less elastic, is without sebaceous follicles, sweat glands or hairs, and is of less vitality, so that it readily ulcerates under pressure, or even during a defective state of the general health.

COMA (kō-me). A morbid disposition to sleep, from some cerebral mischief, in which the power of voluntary motion, sensation, and thought, are suspended. It may be due to apoplexy, a large dose of opium, intoxication, etc.

CONGESTION. Excessive fulness of the blood-vessels of some particular organ.

CONTAGION (*kon-ta'-je-on*). The communication of disease by contact. A disease is *contagious* when it may be communicated by infected persons to persons in health, as small-pox, scarlatina, measles, typhus, etc.; diseases which are destitute of this property,—ague, influenza, etc,—are termed *non-contagious*.

DEGENERATION. A morbid change in the structure of parts, by the substitution of a lower for a higher form of tissue, as in the development of a fatty, in place of a muscular, tissue. The most frequent example of this occurs in *fatty degeneration of the heart*.

DESQUAMATION (*desquāmo*, to scale fishes.) The separation of *laminæ* or scales from the skin or bones.

DIAGNOSIS (*di-ag-no'-sis*). The science of distinguishing the signs or symptoms by which a disease is known or distinguished from another—a science which can only be acquired by long study and practical observation.

DIATHESIS (*di-ath'-e-sis*). This word is used in this work to express a particular constitutional tendency, hereditary or acquired, to certain diseases. The chief diatheses are the scrofulous, consumptive, rheumatic, gouty, and cancerous.

DROPSY (*drop'-se*). This is a serous or watery accumulation in one or more of the natural or serous cavities of the body, and is probably due to a want of harmony between the two processes of exhalation and absorption. If the watery accumulation take place in the ventricles of the brain, it is called *hydrocephalus*; if the membrane that lines the surface of the lung is distended with fluid, we express the condition by the term *hydrothorax*; if the membrane of the heart, *hydropericardium*; if the membrane of the intestines, *ascites*; if of the testicles, *hydrocele*.

In health, there is a gentle and uninterrupted oozing forth of fluid, just sufficient to allow of the free motion of the membranes and their contained organs; if this fluid is arrested (as in inflammation), pain or adhesion may result; if it take place in excess, or if exhalation takes place more rapidly than absorption, dropsy results. (See also "Œdema.") We have not included dropsy in our list of diseases in this work, because it is rather a symptom or consequence of other disease, than a disease *per se*. *Arsen.*, *Bry.*, *China*, and *Hell.*, are the chief remedies in this condition.

DYSPNŒA (*disp-ne'-a*). Literally, difficult breathing, from organic or functional change, deranging the natural proportion between the quantity of atmospheric air that reaches the lungs, and the quantity of blood sent to them from the right side of the heart to be arterialized. (See pages 41, 144, 148).

ECCHYMOsis (*ek-ke-mo'-sis*). Discoloration of the skin from extravasated blood. (See page 413).

EFFETE (*cf-fete'*). Worn out; having lost the power of production.

EMMENAGOGUES (*em-en'-o-goges*). Medicines to bring on the menstrual discharge.

ENCEINTE (*ang-sainte'*). Pregnant.

ENDEMIC. Peculiar to a people or locality. Endemic diseases result from such conditions or agencies as are peculiar to a locality. These endemic influences are, for the most part, exerted by the geological properties of a district, and are traceable to the constitution and state of the soil, water, and air; to elevation above the level of the sea, vicinity of sea, rivers, or stagnant water, woods, and vegetation; variation of temperature, prevalent winds; in connexion with avocations, modes of life, quality and quantity of food, indo-

lence or activity, ignorance or mental culture, and, lastly, the political, social, moral, and religious conditions of the people.*

EPHEMERAL (*e-fem'-e-ral*). Diurnal; beginning and ending in a day; short-lived.

EPIDEMIC (from two Greek words, *among* and *people*). An epidemic is a disease depending probably upon the absorption of some poison, or the action of some "influence," from without, which for a time prevails widely among a people, and afterwards partly or wholly disappears. As secondary results of these general disorders, the respiratory organs are most frequently involved, especially during very cold or damp weather, or during sudden and extreme variations of temperature. At another time the force of the epidemic is expended on the head, affections of which then predominate; or, again, on the alimentary canal. Ill health always favours the reception and activity of the epidemic influence.

EPISTAXIS (*e-pis-tak'-sis*). Bleeding at the nose.

EXUDATION (*egz-u-da'-shun*). The separation of certain substances, humours, or moisture from the blood, either on the surface or in the substance of organs.

FOMITES (pl. of *fomes*). Clothing or other materials imbued with contagion.

FONTANEL (*fon'-ta-nel*). Spaces between the bones of the infant head. The bony structure which encloses the brain is originally composed of many distinct bones simply connected by membrane, so that the separate bones can overlap each other to some extent and thus facilitate parturition. For some time after birth, portions of the skull-cap remain united by membrane only, as may be easily proved by feeling the head of an infant. Here, as in the former instance, we are struck with the evidence of wisdom and goodness in the formation of man. A yielding, elastic animal membrane interposed between the bones encasing so important an organ as the brain, breaks the force of shocks and prevents jars to the brain, to which the helpless infant is so much exposed. It is those unossified parts which are called "fontanels," from the rising and falling of the brain beneath them, like the bubbling of a spring. As the child grows, and can extend the arms and otherwise defend the head, the edges of the bones approximate and dovetail together, forming a solid dome of bone.

GANGLION. This is an encysted tumour formed by the sheath of a tendon, or by a new cyst developed in one of the fringes of the synovial sheath, or by a bursa, whether original or created by friction. It contains clear synovia. The ordinary causes are twists, strains, pressure, or friction.

GANGRENE (*gang'-grene*). Mortification of a portion of a living body. This condition is called gangrene only in its first stage, and when it becomes complete and hopelessly irremediable, it is called *sphacelus*.

GANGRENA SENILIS. Dry gangrene of aged persons, commonly resulting from ossification of the arteries, and the stagnation and coagulation of the blood consequent on that change.

GENERIC (*je-ner'-ik*). Pertaining to the same genus or kind.

HÆMOPTYSIS (*he-mop'-te-sis*). Spitting or coughing up of blood.

HEMICRANIA (*hem-e-kra'-ne-a*). Headache affecting one side of the brow and forehead. It has been called *sun-pain*, because it frequently continues only as long as the sun is above the horizon. It is generally attended with sickness, is often periodical, and like other forms of neuralgia, most frequently results from debilitating causes. Malaria is often a cause, and sometimes it occurs in connection with hysteria.

* See Aitken's Science and Practice of Medicine, Vol. 1.

HIPPOCRATIC FACE (*facies hippocratica*). Pale, contracted, and sunken face, regarded as an unfavourable symptom in disease.

HOMŒOPATHY (*ho-me-op'-a-the*). That system of curing disease by the administration of a drug, the selection of which is guided by virtue of the properties it has been proved to possess of creating in the body in health, in large doses, a similar disease to that it is given to cure. (See "Provings.")

HYGIENE (*hi-je'-e-an*). That branch of medicine which teaches the means to be used for the preservation of health.

HYGIENIC (*hi-je-en'-ik*). Pertaining to health.

HYPERŒMIA (*hi-per-e'-me-a*). A preternatural accumulation of blood, of an active or arterial, or passive or venous kind. The former is often natural and beneficial, as in enlargement of the womb during pregnancy, and of the breasts during lactation. It may occur under other circumstances, as in headaches, from excitement. Excessive hyperŒmia usually results in hæmorrhage, as in apoplexy, epistaxis, etc.

HYPERTROPHY (*hi-per'-tro-fe*). An increase in size of the healthy structure of an organ, due to increased exercise of a part, or to an increase of nutritious materials in the blood appropriated by a part. It is the opposite condition to *atrophy*.

IDIOPATHIC (*id-e-o-path'-ik*). Indicative of original or primary disease.

INCUBATION (*in-cū-bo*, to sit on eggs). Applied to the period during which contagious diseases remain dormant, between the reception of the poison and the development of the symptoms of the disease. During this time it is said to lie dormant, there being no symptoms, or none determined, and to be inducing those changes in the body which lead to its development.

INDIGENOUS (*in-dij'-en-us*). From *in*, in, and *gigno*, to beget. Native. Peculiar to a country. Not exotic.

INGESTA (*in-jest'-a*). The food taken into the stomach.

INNOCUOUS (*in-nok'-u-us*). Harmless. Producing no ill effects.

INTUSSUSCEPTION (*in-tus-sus-sep'-shun*). The reception of one part within another, as of a sword in a sheath; as applied to the bowels, it expresses the invagination or slipping of one portion of the intestines into, and constriction by, another. This condition is seldom recognised in time for any operative measures, being often mistaken for dysentery.

LACHRYMATION (*lak-re-ma'-shun*). A preternatural flow of tears.

LESION (*le'-zhun*). From *lædo*, to hurt. An injury, wound, or hurt of a part.

LIQUOR AMNII. The amnion is a thin, firm, nearly transparent membrane, forming a closed sac, and contains the waters (*liquor amnii*) which surrounds the foetus in utero. This fluid acts mechanically; it allows the limbs to expand, prevents pressure, and is strictly conservative. See also "Amnion."

LIQUOR SANGUINIS. The watery fluid in which the red globules of the blood are suspended during life.

MENSES. From *mensis*, a month. The monthly discharge from the womb; also called the courses, catamenia, etc.

METASTASIS (*me-tas'-tā-sis*). The transference of local symptoms of disease from one part of the body to another, as often happens in respect to the joints in acute rheumatism, and between the parotid gland and the mamma, or testicle in mumps. (See these diseases.)

MIASMA (*mi-az'-ma*). Minute particles of infectious substance floating in the air, the emanations from swampy grounds.

MICTURITION (*mic-tu-rish'-un*). The act of passing urine.

NATES (*na'-teez*). The buttocks.

NECROSIS (nee-rô'-sis). Mortification or death of bone.

OBESITY (o-be'-es-ty). Excessive deposition of fat under the skin, and around some of the organs of the body. A moderate quantity of fat (*subcutaneous*) is indicative of health. Fat is a non-conductor, preventing the too rapid escape of animal heat; it constitutes also a store of material for the time of sickness or during temporary inability to take food. In excess, however, it becomes inconvenient, and often leads to both physical and mental inactivity. The tendency of an excess of fat on the general health must be regarded as unfavourable; the functions of breathing, digestion, and circulation are accomplished with more or less difficulty, and such persons are usually either unable or indisposed to take sufficient exercise to promote good health. The following circumstances predispose to obesity—an abundant and rich dietary; plenty of rest and sleep, comfortable temperature; freedom from anxiety; and suppression or diminished activity of the sexual functions. The intimate connexion between the sexual and nutritive organs is well known; thus eunuchs, and women after the cessation of the menstrual function, often become corpulent, and amongst the inferior animals, fattening is readily effected after the removal of the testicles or ovaries. The treatment of obesity or corpulence must be chiefly in the direction of *diet* and *habits*, each case requiring to be regulated by the circumstances peculiar to it. Medicines are also useful.

OEDEMA (e-de'-ma). A term applied to a condition in which the areolar tissues become infiltrated with serum or watery fluid. The swelling is soft, inelastic, diffused, and leaves for some time the indentation made by the pressure of a finger. When the accumulated fluid takes place more or less generally throughout the body, it is called *anasarca*. (See "Dropsey.")

ŒSOPHAGUS (e-sof'-a-gus). The gullet. The canal through which food and liquids pass from the mouth to the stomach.

OLFACTION (ol-fak'-shun). The act of smelling. Some medicines, as the strong spirits of *Camphor*, may be administered in this manner.

ORCHITIS (or-ki'-tis). Acute inflammation of the testicle, sometimes resulting from a blow, but more often from gonorrhœa, being an extension of the disease from the urethra.

ORTHOPIŒA (or-tho-pî'-æ-a). Difficulty of breathing, preventing the patient from lying down, the erect position permitting freer expansion of the chest, and removing the pressure of the abdominal organs from the diaphragm.

OSSIFICATION (os-se-fe-shun). The process of conversion from flesh into bone. *Ossific*, of the nature of bone.

OTALGIA (o-tal'-je-a). Earache. (See page 342.)

PATHOLOGY (pa-thol'-o-jy). The doctrine or investigation of the nature of diseases, both medical and surgical.

PHTHISIS (thi'-sis). Literally, to consume. A disease characterized by a deposit of tubercles in the lungs, commonly known by the name of Consumption. (See page 173.)

PHOTOPHOBIA (fo-to-fô'-be-a). Dread of light.

PHYSIOLOGY (fiz-e-ol'-o-jy). The term is derived from the Greek words, *physis*, and *lex*, and signifies the science which treats of the phenomena of organized beings, whether animal or vegetable, the former being described as *animal physiology*; but if we desire to apply the term to the laws which control the vegetable kingdom, we call it *vegetable physiology*. The term is restricted to the study of the laws which pervade the *animals* as distinguished from the *inanimate* world. The study of the laws of the latter is called *natural philosophy*. Physiology, then, is a science which treats of the actions or functions peculiar to *living*, organized beings, while in a state of health, and

affords us the criterion by which to judge of diseased conditions and phenomena. For without a knowledge of healthy symptoms, it must be impossible to recognize those of disease. Any person, for example, who is ignorant of the normal heart-sounds, must be unable to determine when they are abnormal. "How shall the ear detect a discord, if it be not educated to the music of that organ which plays so wonderfully and so well the great anthem of life?"

PLETHORA (*pleth'-or-a*). A redundant fulness of the blood-vessels. It is that condition in which the quantity of blood and its nutritive qualities exceed the healthy standard.

PROGNOSIS (*prog-no'-sis*). Foretelling the future course, changes, and termination of a disease. This is often of great importance, as in cases in which there is a fair probability of recovery a favourable prognosis furnishes the stimulus of hope which in itself aids recovery. On the other hand, when a fatal termination seems inevitable, a proper statement of the case to the patient or his friends may afford him an opportunity of adjusting his worldly and spiritual affairs.

PROPHYLACTIC (*pro-fe-lak'-tik*). A medicine which prevents disease, as *Belladonna* prevents scarlatina, *Camphor*, cold, etc.

PROPHYLAXIS (*pro-fe-laks'-is*). The science of averting diseases.

PROVINGS.—In homœopathic literature this term means the taking a drug in health with the view of ascertaining what symptoms it is independently capable of producing in the body, and in what parts or organs its force is chiefly expended. A record of these symptoms constitutes the *provings* of the medicine, and is the unerring guide to its administration in disease. Whenever symptoms *resembling* those produced by the drug occur as the result of disease, the administration of that drug in small doses is the true curative means. Success accidentally attending the administration of allopathic medicines is governed by this law of *similitude*, even though the law itself be unrecognised. And here we have an illustration of the immeasurable superiority of the new method over the old. In the latter, the effects of drugs are tried on persons *already suffering from disease*, which renders such a method both uncertain and cruel,—*uncertain*, because the effects of the drug can rarely be distinguished from those produced by the disease; and *cruel*, because it too often aggravates the sufferings of the patient, and may jeopardize his recovery by placing obstacles to that natural tendency to health which our Beneficent Creator has interwoven with life.

PUBERTY (*pew'-ber-te*). From *pubeo*, to wax ripe. That period of life and development when the individual becomes capable of propagating his species.

PYROSIS (*pir-o'-sis*). Waterbrash; heartburn. The affection is characterised by frequent eructations of an acid or tasteless watery fluid, sometimes in considerable quantities. It occurs mostly in persons who are poorly fed, and is often caused by indigestible or a too exclusively vegetable diet. It is often accompanied with pain, and is sometimes a symptom of organic disease of the stomach or liver.

REFRIGERANT (*re-frij'-er-ent*). A medicine which reduces febrile symptoms.

RESOLUTION (*rez-o-lu'-shun*). The dispersion of inflammatory affections, swellings, indurations, etc., without the formation and discharge of matter.

RIGOR (*ri'-gor*). A sudden sensation of coldness with shivering. Rigors usher in almost all varieties of fever; but when they occur *after* inflammatory symptoms have existed for some time, they generally indicate the formation of pus in the part or organ inflamed. Under certain conditions of the system, slight causes will sometimes excite rigors, as the introduction of a catheter along the urethra.

RIGOR MORTIS.—The stiffening of the body after death. The time of its occurrence, its degree, and duration, are influenced by various circumstances. Sometimes it takes place in a few minutes, at other times not till several days after death. The longer it is delayed the greater is its intensity and the longer it lasts, and *vice versa*. Men killed early in the day of battle are found to stiffen slowly, but, killed late in the day, when they are fatigued, stiffen quickly. When a healthy animal is killed which has not been recently exhausted by exertion, the rigor mortis does not take place for a long time, but is very marked when it does. Animals should rest before they are slaughtered, to prevent early decomposition. Directly after the rigor mortis passes off putrefactive changes commence.

SENILE (*se'-nile*). Pertaining to old age.

SENILITY (*se-nil'-e-te*). Old age.

SEQUEL (*se'-kwel*). (*Sequor*, I follow.) That which follows another. *Sequela*, plu. *sequelæ*. Effects following diseases.

SORDES (*saw'-dez*). Foul matter. The matter which gathers round the teeth in fevers, has received this designation.

SPERMATOZOA (*sper-mă-to-zo'-ă*). Minute infusorial animalculæ in the semen.

STASIS. Stoppage of the blood in a part, and exudation of the *liquor sanguinis*, leading to endosmotic changes in the red corpuscles and disposing them to aggregate.

STERTOROUS (*ster'-to-rus*). Snoring. Stertorous breathing is that in which each inspiration is performed with deep snoring. It occurs in apoplexy, compression of the brain, coma, etc. (See page 321.)

SYNOVIA.—The fluid secreted by certain glands in the joints, with which the cartilaginous surfaces of the articulating heads of bones are lubricated and their motions rendered easy.

TETANUS (*tet'-ă-nus*). A diseased condition in which there is spasm and rigidity of the muscles of voluntary motion. It is called *idiopathic* when arising from disorder of the blood or nervous system; and *traumatic* when caused by an injury. It may be partial or general. The chief *remedies* are, *Bell.*, *Hyos.*, *Opi.*, *Nux Vom.*, and *Arn.*

THORAX (*tho'-raks*). The chest, or that part of the body between the neck and the abdomen, surrounded by ribs, and enclosing the lungs, heart, etc.

TORMINA (*tawr'-me-na*). Severe griping pain in the bowels.

TOXICOLOGY. Relating to poisons, their nature and effects.

TRAUMATIC (*traw-mat'-ik*). Pertaining to wounds.

TRITURATE (*trit'-yu-rate*). Rubbing or grinding to a very fine powder. Trituration is a process applied to those substances, chiefly mineral, the molecular structure of which is so tenacious as to be incapable of distribution in a liquid medium, unless the cohesion of their constituent particles is broken up. It was first principally adopted by Hahnemann, and is now extensively practised in homœopathic pharmacy. (See page 45.)

TUMOUR.—A swelling or enlargement caused by morbid growth. *Innocent* tumours are compatible with a state of general good health except by an accidental or local circumstance in which, by their bulk or situation, they impair or obstruct the function of parts upon which they may press; and these inconveniences cease when the tumour is removed, and when fully removed they do not return. *Malignant* tumours are of constitutional origin, progress uniformly, are, when established, attended with pain and cachexia, often resist all treatment, invade the lymphatic glands, return if cut out, and sooner or later, prove fatal.

UMBILICAL (*um-be-lĭ'-kal*). Pertaining to the navel, as the umbilical cord.

UMBILICUS (*um-be-li'-kus*). The navel.

URETHRA (*yu-rĕ'-thra*). The canal by which the urine is conducted from the bladder and discharged.

UTERUS (*yu'-te-rus*). The womb.

VASCULAR (*vas'-ku-lar*). Pertaining to the vessels of animal bodies—arteries, veins, etc. ; abounding in blood-vessels.

VERTIGO (*ver-ti'-go*). Giddiness ; dizziness, with a sensation as if falling.

VESICLE (*ves'-e-kel*). An elevation of the cuticle with a watery fluid forming a little bladder, as in vesicular erysipelas.

VOMICA (*vom'-e-ka*). An abscess in the lungs. (See page 175.)

ZYMOSIS (*zi-mo'-sis*). Diseases which depend upon endemic, epidemic, and contagious influences. The word indicates the supposed mode—fermentation—in which the specific poisons act on the blood. Diseases of this order are chiefly propagated, communicated, or diffused through the agency of contaminated persons, food, water, or through infected air. The total number of deaths from diseases of this class per annum in Great Britain are from 21 to 26 per cent.

ZYMOTIC.—Pertaining to an epidemic or contagious affection.

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